

Faculty of Health College of Pharmacy

## PHAR 2082 Community (2 weeks) & PHAR 3081/2 Community (4 weeks) Combined Pandemic Course Offering

6 consecutive weeks @ minimum 35 hours per week

\*\*To start a rotation a student must hold a valid Pharmacy Student License for the province of their rotation & where required by law individual personal professional liability insurance. NEW: If the student has completed injection training in April 2021 and located in Nova Scotia the student must also hold a valid technical permit for injection from NSCP.

Students must file any needed preceptor/site forms for approval with the NB & PEI College of Pharmacists prior to the start of the rotation.\*\*

<u>Please review practice supervision reminder on page 3</u>

### PRACTICE EXPERIENCE PROGRAM Third Year Community Rotation Manual Bachelor of Science in Pharmacy Class of 2022 Spring/Summer 2021

© Dalhousie University College of Pharmacy Enhancing health and wellness through pharmacy education, research and community service. Through our work, we support the conscientious use of medications in society. College of Pharmacy • Burbidge Building, 5968 College Street, PO Box 15000 • Halifax (K'jipuktuk) NS B3H 4R2 Canada Tel: 902.494.2378 • Fax: 902.494.1396 • Email: pharmacy@dal.ca Dalhousie University sits on the ancestral and unceded territory of the Mi'kmaq nation.

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**Preceptor CE Forms will be posted on the College of Pharmacy website**: https://www.dal.ca/faculty/health/pharmacy/programs/related-resources.html

### Practice Supervision Reminder for Pharmacist Preceptors & Pharmacy Students IMPORTANT PRACTICE SUPERVISION REMINDERS:

Pharmacy students and preceptors are reminded that while on practice experience program rotations, pharmacy students must be under the appropriate supervision of their pharmacist preceptor. The pharmacist preceptor is professionally responsible for the pharmacy student.

Students and preceptors must review at the start of the rotation the strategy that will be followed to achieve the appropriate level of supervision to meet the pharmacy legislation requirements for the province of the rotation. The definition of appropriate "supervision" may be different in each province and it would be prudent for both the student and preceptor to know and understand that definition prior to commencing the practice experience.

Pharmacy students must clearly identify themselves as pharmacy students when in practice.

It is an expectation of the Dalhousie University College of Pharmacy that students are supervised by preceptors in a manner that maximizes opportunities for regular formative and summative feedback and the provision of safe and effective patient care at all times; and that satisfies the legal requirements for pharmacy practice in the province of the rotation.

Pharmacy students must be licensed in the province of their rotation and must hold personal professional liability insurance where required by law. Preceptors and pharmacy students must ensure that any required registration, preceptor and site documentation is filed with/approved by the provincial pharmacy regulator prior to the start of a practice experience program rotation.

\*\*<u>PLEASE NOTE:</u> Members of the Class of 2022 <u>may have</u> received immunization and injection training please review this with your student, a special early injection training program was offered on campus in April 2021 to members of the Class of 2022 who could attend. PLEASE NOTE: Students who are licensed as Pharmacy Students in Nova Scotia with NSCP would also need to secure a Technical Permit for Injection along with their Pharmacy Student license & personal professional liability insurance\*\*

#### THANK YOU PRECEPTORS

Thank you to the community pharmacist preceptors and pharmacy team members who have worked tirelessly during uncertain times to provide health care to Canadians.

Thank you for taking on the critical role of being a preceptor during these uncertain times.

Welcome to the Spring/Summer Practice Experience Program (PEP) at the College of Pharmacy, Dalhousie University, for the academic year 2020-2021.

Since March 2020 we have faced challenging times in Canada and the world as we navigate the reality of the ongoing COVID-19 Pandemic.

Community Pharmacists have played a significant role in maintaining and providing primary health care to Canadians during a Pandemic. Pharmacists will also play a vital role in the distribution and administration of Pandemic vaccines.

Sincere thanks are sent to the large group of dedicated pharmacists who volunteer their time, expertise and energy as preceptors even during uncertain and busy times. The College of Pharmacy Practice Experience Program thanks you for taking the time to participate as a PEP preceptor. Preceptors, you are the heart of the practice experience program and your dedication to the pharmacy profession is valued and appreciated.

Tracy Jollymore, Administrative Secretary, provides important support to the practice experience program by looking after all things related to the administration and organization of PEP materials that reach both student and preceptor. Tracy's dedication and organizational abilities help this program run smoothly each year.

Thank you to Julie Chen for her help with PEP this past term.

Thank you to the PEP Teaching Assistant Pharmacy Student Cecily Strongman (Class of 2022) who has helped PEP during the 2020-21 academic year.

Please watch for College of Pharmacy updates as the PEP team expands to continue to support learners and PEP partners across the Maritimes. New PEP roles will be advertised here under staff: <a href="https://dal.peopleadmin.ca/">https://dal.peopleadmin.ca/</a>.

Please contact me should you need assistance either as a student or preceptor or have questions about current or future PEP curriculum.

Thank you for your support of the Practice Experience Program!

Sincerely,

arriet Daire/

Harriet Davies, BSc (Pharm), CDE, M.Ed. Coordinator of Clinical Education WORKING OFF-CAMPUS DUE TO COVID-19 E-Mail: <u>Harriet.Davies@dal.ca</u> Currently have no access to a fax machine.

#### **COVID-19 Resources and Guidance for Students**

As COVID-19 information continues to evolve, students are reminded to consult provincial and national Public Health resources for the most up-to-date information. Students should discuss with their preceptor(s) the public health, safety and security protocols and procedures that are in place at their rotation site.

Students, please refer to the Brightspace PEP course for COVID-19 PPE and other resources such as:

- Video resources for donning and doffing of medical and non-medical masks
- Video resources for proper hand hygiene
- Information on personal protective equipment (PPE)
- Links to Public Health websites

#### AFPC EDUCATIONAL OUTCOMES: EXECUTIVE SUMMARY

The Association of Faculties of Pharmacy of Canada (AFPC) Educational Outcomes (EOs) focus on what graduates are able to do at the end of a Baccalaureate or Doctorate program that is the first professional degree in pharmacy (i.e., entry-to-practice pharmacy degree programs). They signal curricular priorities and a framework for curriculum design without being overly prescriptive. The Educational Outcomes focus attention on outcomes that matter to patients, the profession of pharmacy and Canadian society. They aim to advance pharmacy education so that pharmacy graduates are prepared to meet the changing expectations of the communities they serve.

The APFC Task Force on Educational Outcomes was struck by the AFPC Council of Faculties in mid-2016 to revise the 2010 version and they completed their work in spring 2017. The result was the development of a revised set of educational outcomes for all entry-to-practice pharmacy programs in Canada, regardless of the degree offered (Bachelor of Science in Pharmacy or PharmD). The work was informed by feedback from focus group discussions with representatives from faculties of pharmacy in Canada and literature from pharmacy and the other health professions. The Task Force sought feedback on the draft documents from all pharmacy faculties across Canada, national and provincial pharmacy organizations and external stakeholders. The final document includes modifications based on the recommendations from these groups.

The 2017 version of the AFPC Educational Outcomes retains CanMEDS terminology (Royal College of Physicians and Surgeons of Canada) and draws from several concepts in CanMEDS 2015 role statements. It also draws upon concepts described in other sources. The 2017 Educational Outcomes represent a conceptual shift since publication of the 2010 EOs. In the 2010 version, the expression of each role was independent of and had no particular relationship to one another. In the 2017 version, the relationship of the roles to one another is based on provision of patient care (Care Provider), which is at the heart (core) of the discipline of pharmacy in Canada. To meet the expectations of patients and society, graduates must take an appropriate approach to the core of the discipline, which is pharmacy care. To provide the quality of pharmacy care required, graduates are able to approach pharmacy practice by skilfully integrating Communicator, Collaborator, Leader-Manager, Scholar and Health Advocate roles in their Care Provider role. In addition, graduates are educated to fulfill roles beyond those required of pharmacists, acknowledging that the goal of university education extends beyond solely preparing graduates to enter into pharmacy practice. AFPC believes that pharmacy graduates must be grounded in a professional identity when being a Care Provider. Accordingly, the conceptual shift is that the Professional role is not one among many roles; rather it is the overarching ethos of the discipline of pharmacy - the spirit that guides graduates' practice and their approach to practice regardless of the type of practice in the field of pharmacy.

The 2017 Educational Outcomes are significantly different from previous ones in organizing structure. The EOs comprises multiple Role Statements: Care Provider, Communicator, Collaborator, Leader-Manager, Health Advocate, Scholar and Professional. Within each Role Statement, the Key Competencies define what graduates need to achieve by the end of the program. These competencies focus on measurable behaviours that are the end product of the program. They reflect the expectation that there will be use or application of knowledge and skill acquired during the program. Enabling Competencies delineate specific sub-components of competencies that graduates need to achieve in order to attain the competency required at the end of the program. A complete listing of Concepts that underlie the EOs 2017 is available in each Role Statement. To support the EOs 2017, several documents are included in an Educational Outcomes 2017 User Manual: Orientation Resource – Conceptual Framework for Educational Outcomes for Canadian First Professional Degree Programs in Pharmacy; Crosswalk to Canadian Interprofessional Health Collaborative (CIHC) National Interprofessional Competency Framework; Sample Learning Objectives; and Glossary of Terms.

AFPC Educational Outcomes 2017 – Executive Summary ©Association of Faculties of Pharmacy of Canada – June 2017

ROLE	DEFINITION	KEY COMPETENCIES – Pharmacy Graduates are able to:
CARE PROVIDER	As <b>Care Providers</b> , pharmacy	<b>CP1:</b> Practise within the pharmacist scope of practice and expertise.
(CP)	graduates provide patient-centred	<b>CP2:</b> Provide patient-centred care.
(01)	pharmacy care by using their	<b>CP3:</b> Actively contribute, as an individual and as a member of a
	knowledge, skills and professional	
	judgement to facilitate management of	team providing care, to the continuous improvement of health care
	a patient's medication and overall	quality and patient safety.
	health needs across the care continuum.	
	Care Provider is the core of the	
	discipline of pharmacy.	
COMMUNICATOR	As <b>Communicators</b> , pharmacy	<b>CM1:</b> Communicate in a responsible and responsive manner that
	graduates communicate effectively in	
(CM)		encourages trust and confidence.
	lay and professional language, using a	<b>CM2:</b> Communicate in a manner that supports a team approach to
	variety of strategies that take into	health promotion and health care.
	account the situation, intended	
	outcomes of the communication and	
	diverse audiences.	
COLLABORATOR	As <b>Collaborators</b> , pharmacy graduates	<b>CL1:</b> Work effectively with members of the health team including
(CL)	work collaboratively with patients and	patients, pharmacy colleagues and individuals from other
	intra- and inter-professional teams to	professions.
	provide safe, effective, efficient health	CL2: Hand over the care of a patient to other pharmacy team
	care, thus fulfilling the needs of the	members and non-pharmacy team members to facilitate continuity of
	community and society at large.	safe patient care.
LEADER-MANAGER	As Leaders and Managers, pharmacy	LM1: Contribute to optimizing health care delivery and pharmacy
(LM)	graduates engage with others to	services.
	optimize the safety, effectiveness and	LM2: Contribute to the stewardship of resources in health care
	efficiency of health care and contribute	systems.
	to a vision of a high-quality health care	LM3: Demonstrate leadership skills.
	system.	LM4: Demonstrate management skills.
HEALTH ADVOCATE	As Health Advocates, pharmacy	<b>HA1:</b> Respond to an individual patient's health needs by advocating
(HA)	graduates demonstrate care for	with the patient within and beyond the patient care environment.
(1111)	individual patients, communities and	<b>HA2:</b> Respond to the needs of communities or populations they
	populations by using pharmacy	serve by advocating with them for system-level change in a socially
	expertise to understand health needs	accountable manner.
	and advance health and well-being of	accountable manner.
	others.	
SCHOLAR	As <b>Scholars</b> , pharmacy graduates take	SC1: Apply medication therapy expertise to optimize pharmacy care
(SC)	responsibility for excellence by	pharmacy services and health care delivery.
	applying medication therapy expertise,	
	learning continuously, creating new	SC2: Integrate best available evidence into pharmacy practice.
	knowledge and disseminating	<b>SC3:</b> Contribute to the creation of knowledge or practices in the field
	knowledge when teaching others.	of pharmacy.
	knowledge when teaching others.	SC4: Teach other pharmacy team members, the public and other
		health care professionals including students.
PROFESSIONAL	As Professionals, pharmacy graduates	<b>PR1:</b> Committed to apply best practices and adhere to high ethical
(PR)	take responsibility and accountability	standards in the delivery of pharmacy care.
	for delivering pharmacy care to	PR2: Able to recognize and respond to societal expectations of
	patients, communities and society	regulated health care professionals.
	through ethical practice and the high	<b>PR3:</b> Committed to self-awareness in the management of personal
	standards of behaviour that are	and professional well-being.
	expected of self-regulated	and proteosional work comp.
	professionals. The Professional role is	
	the overarching ethos of the discipline	
	of pharmacy.	

AFPC Educational Outcomes 2017 – Executive Summary ©Association of Faculties of Pharmacy of Canada – June 2017

### <u>UPDATED FOR COVID-19:</u> What needs to be returned ONLINE and when?

Information about COVID-19 continues to evolve daily, students should monitor Public Health updates. Students should strategize with preceptors about ways to complete the rotation activities while protecting your health and the health of patients and the pharmacy team. The College of Pharmacy Practice Experience Program understands and supports that some activities may need to be modified in order to accommodate Public Health safety requirements.

Please use the assessment forms within this manual for onsite assessment purposes. Both preceptors and students should keep copies of the onsite assessment forms for your records.

# The following is what needs to be returned to the College of Pharmacy ONLINE upon completion of the rotation:

**<u>NEW</u>**: ONLINE Via Dal Brightspace from the Student:

Within 7 regular calendar days of completing the rotation

- Student Evaluation of PEP Program Content (2082 & 3081/2)
- Student Evaluation of Site
- Student Evaluation of Preceptor

**NEW:** ONLINE Via Dal Online Assessment Link from the Preceptor: Within 7 calendar days of completing the rotation (assessment link will be emailed)

- Preceptor Final Assessment of Student completed via online link (2082 & 3081/2)
- Preceptor Evaluation of PEP Program Content completed via online link (2082 & 3081/2)

**NEW:** The preceptor CE form will be posted on the College of Pharmacy website: https://www.dal.ca/faculty/health/pharmacy/programs/related-resources.html

#### College of Pharmacy, Dalhousie University Bachelor of Science in Pharmacy Program Four-Year Overview of Curriculum Content

Program	Class Number & Name
Year	
First	PHAR 1060 Pharmacy Administration I
	PHAR 1071/2 Skills Lab I
	PHAR 1081/2 Community Experience Program (Service Learning)
	ANAT 1040 Basic Human Anatomy
	MICR 1050 Basic Microbiology & Immunology for Pharmacy
	CHEM 2442 Organic Chemistry
	PHYL 1400 Human Physiology
	BIOC 1040 Biochemistry for Pharmacy
	PHAC 1470 Pharmacology for Pharmacy
Second	PHAR 2011/2 Critical Appraisal Series IA & IB
	PHAR 2200 Topical Products (Derm, Eye & Ear)*
	PHAR 2035 Respiratory Tract Complaints*
	PHAR 2040 Gastrointestinal Disorders*
	PHAR 2045 Nutrition
	PHAR 2055 Drug Disposition
	PHAR 2060 Medication Use Management
	PHAR 2071/2 Skills Lab II
	PHAR 2081 Practice Experience I (Hospital 2 weeks)
	PHAR 2082 Practice Experience II (Community 2 weeks)
Third	PHAR 3011/2 Critical Appraisal Series II
	PHAR 3020 Women's Health Issues*
	PHAR 3030 Infectious Diseases*
	PHAR 3040 Cardiovascular Diseases*
	PHAR 3050 Pain and Rheumatology*
	PHAR 3055 CNS and Behavioral Disorders*
	PHAR 3060 Endocrine Disorders*
	PHAR 3071/2 Skills Lab III
	PHAR 3081/2 Practice Experience III (Community 4 weeks)
Fourth	PHAR 4010 Critical Appraisal Series III
	PHAR 4025 Pathocytologic Disorders*
	PHAR 4035 Disorders of the Liver and Genitourinary Systems*
	PHAR 4060 Advanced Patient Health Management
	PHAR 4070 Skills Lab IV
	Injection Training for Class 2022: April 2021 & Fall 2021 TBA
	PHAR 4080 Practice Experience IV (Hospital/Long-Term Care 6 weeks)
	PHAR 4085 Practice Experience V (Community 6 weeks)
	IPHE 4900 Interprofessional Health Education Portfolio (Completed over 4 years)
* Tho	se are multidisciplinary PBL units consisting of pharmaceutical sciences, pharmacotherapeutics,

\* These are multidisciplinary PBL units consisting of pharmaceutical sciences, pharmacotherapeutics, and pharmacy administratio

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
PHAR 2081 Week One						
PHAR 2081 Week Two						
PHAR 3081/2 Week One						
PHAR 3081/2 Week Two						

PHAR 3081/2 Week Three			
PHAR 3081/2 Week Four			

#### DALHOUSIE UNIVERSITY College of Pharmacy FOR REVIEW: Clinical Rotation Orientation Materials Student Communication Profile (SCP)

Adapted from Grey-Bruce Regional Health Centre/D'Youville College Student Placement Profile/Dalhousie School of Physiotherapy

Students, please complete this Student Communication Profile (SCP) and review the contents with your preceptor at the start of the rotation.

Students, please review the rotation orientation checklist in this manual with your preceptor at the start of the rotation.

STUDENT NAME:	
STUDENT EMAIL:	
CONTACT NUMBER	URING ROTATION:

#### ROTATION DATES: \_\_\_\_\_

Is there anything your preceptor should be aware of that might affect your ability to perform on this clinical rotation?

What are your personal learning objectives for this clinical rotation and explain how you intend to achieve them?

What are your clinical, interpersonal and professional strengths?

What other clinical, interpersonal and professional skills would you like to improve during this rotation? Are there any specific disease states or patient populations you wish to have an opportunity to work with and learn from during this rotation?

#### STUDENT TRAVEL TO THE SITE

Please provide your travel/commuting plans to your site each day.

#### **ILLNESS/SICK DAYS DURING ROTATIONS**

Please review the sick day policy for PEP Policy Manual posted on Brightspace and on the College's preceptor development website <a href="http://www.dal.ca/faculty/health/pharmacy/programs/related-resources.html">http://www.dal.ca/faculty/health/pharmacy/programs/related-resources.html</a>

Review who to contact at the site should you be ill and are unable to attend your rotation.

If you have any COVID-19-like symptoms, please visit the Public Health online COVID-19 assessment tool for the province of your rotation. It is important to protect your health and the health of those around you. Please contact your preceptor and the Coordinator of Clinical Education should your COVID-19 screening require you to self-isolate due to travel, illness, testing or other public health protocols.

For provincial COVID-19 assessment tools: please see below for links in Nova Scotia, New Brunswick, and Prince Edward Island.

- NS: <u>http://www.nshealth.ca/coronavirus-assessment</u>
- $\square$  NB:

https://www2.gnb.ca/content/gnb/en/departments/ocmoh/cdc/content/respiratory\_diseases/coronavirus.html

**PEI:** <u>https://www.princeedwardisland.ca/en/service/self-assessment-for-covid-19</u>

Is there anything else you wish to discuss with your preceptor at the start of your rotation?

# Please continue on and review the orientation checklist that starts on the next page.

#### **TO REVIEW: Rotation Orientation Checklist Please complete during the first 48 hours of your rotation.**

Stu	dent & Site-Specific Information to Review
	Student is registered with the appropriate pharmacy regulatory body as a pharmacy student and holds <u>valid personal professional liability insurance where required by law</u> ; students must be licensed <u>and</u> insured where required by law prior to the start of the rotation.
For	Preceptor and student have discussed whether the student can continue to work at another practice site e.g., part-time job, during this the clinical rotation course. In some situations, due to COVID-19 levels in the community the rotation site may request that the student limit their patient care activities to the rotation site only. This is the decision of the practice site. COVID-19 assessment tools, please see below for links in NS, NB, and PEI if outside the Maritimes please ck the website for the Public Health authority in your region.
	In NS: https://novascotia.ca/coronavirus/
	In NB: https://www2.gnb.ca/content/gnb/en/departments/ocmoh/cdc/content/respiratory_diseases/coronavirus.html
	In PEI: https://www.princeedwardisland.ca/en/service/self-assessment-covid-19
	Important student professional supervision reminder provided in this manual reviewed and discussed.
	IN NEW BRUNSWICK: Prior to the start of rotation "Apprenticeship Agreement" filed with NB College of Pharmacists
	IN PRINCE EDWARD ISLAND: Prior to the start of rotation "Preceptor/Site Approval Form" filed with PEI College of Pharmacy via online portal for registrants.
	IMPORTANT: Faculty of Health Guidelines for the Student Use of Social Media & Electronic Communication in Practice Settings has been reviewed. A copy can be found here: <a href="http://www.dal.ca/faculty/health/current-students/student-policies-and-procedures.html">http://www.dal.ca/faculty/health/current-students/student-policies-and-procedures.html</a> .
	Student prepared to identify as a Pharmacy Student during all professional interactions e.g., with patients, prescribers.
	Resume and letter of introduction received and reviewed by preceptor.
	Student communication profile reviewed.
	Student pre-rotation self-assessment completed & reviewed.
	Student emergency contact sheet completed and provided to preceptor.
	Orientation to prescription processing and patient assessment, documentation, medication safety and follow- up procedures used by the site.

#### **Rotation Scheduling and Planning**

- Daily schedule reviewed e.g., arrival, lunch, breaks, departure etc.
- $\Box$  Rotation schedule reviewed for the 2 weeks
- $\Box$  Tentative date for mid-point course assessment using onsite assessment forms:

Tentative date for final course assessment using onsite assessment forms:
Upcoming CE events (virtual/online) student may consider attending:
Important/Frequently Used Numbers
Pharmacy phone number:
Pharmacy fax number:
How to access and save voice mail (if applicable):
Prescriber's line:
Preceptor's e-mail &/or cell:
□ Insurance providers contact information and pharmacy specific identification number
Other important numbers:
Introductions & Review
Pharmacy Staff/Team Introductions
□ Management (Pharmacy and Front Store)
□ Healthcare team members (on and off site)
□ Patients
□ Review of pharmacy practice services offered at the site and how student will be engaged
Review, if available, the provincial Drug Information System (DIS) or equivalent online e-Health portal that connects health care professionals to patient's medication and health records including (if available) lab values and privacy protocols
Review pharmacy privacy protocols
□ Orientation and discussion about pharmacy safety and security protocols and procedures
COVID-19 workplace health and safety protocols, shift scheduling of teams to avoid illness outbreaks, site-specific requirements for appropriate PPE
□
Site Resources
Coat and boot storage
Personal area to work, store books and other materials
Lunch/Staff Room/Microwave & Fridge for food: COVID-19 protocols for meals/breaks
Pharmacy layout (front shop and dispensary)

College of Pharmacy, Dalhousie University Community Pharmacy 2082/3081/2 Manual (Spring/Summer of 2021, Class of 2022)

Location	and use	of private	counselling/	consultation	room
Location	und use	or private	counsening	consultation	room

- $\Box$  Washrooms for staff
- □ Drug information resources
- $\Box$  Internet access
- □ Parking

□ Public transit locations

#### **Technology** Information

- □ Review of site's computer use and health information privacy policy
- □ Review of telephone protocol
- □ Review of telephone system/answering machine
- □ Review of site's computer software for patient management, prescribing, documentation of full scope of practice services, prescribing assessment and documentation procedures, prescription processing, claims adjudication etc.
- □ If applicable, location of computer for word processing, e-mail, online searching etc.
- □ If applicable, passwords assigned for computer access
- □ Review of site's policy re: handheld electronic devices e.g., cell phones, pagers, i-pads, wireless internet etc.
- □ Completion of any required privacy modules related to provincial health information systems.
- □ Review of provincial drug and health information systems that Pharmacists would use to provide patient care including privacy protocols e.g., DIS, SHARE.

 $\square$ 

#### Health and Safety

- $\hfill\square$  Handwashing stations and site policy on handwashing reviewed
- □ Site PPE requirements reviewed, location of PPE supplies
- Procedure to follow at the site if a student receives a sharps injury or any other type of injury while at the site.
   <u>PLEASE NOTE</u>: The College of Pharmacy must be contacted if a student is injured or develops COVID-19 during a PEP rotation. Please contact the Coordinator of Clinical Education: <u>Harriet.Davies@dal.ca</u>.
- $\Box$  Procedure to follow for safety in the private counselling/consultation room(s)
- $\Box$  Person to contact should a student become ill at the site or at home during the rotation
- $\Box$  Procedure to follow should the student call in sick or have a personal emergency
- $\Box$  Procedure to follow if there is a storm and travel and/or public transport is impacted to or from the site
- $\Box$  Procedure to follow if late arriving to the site e.g., who to contact
- **Review the safety procedures to follow should the pharmacy be robbed**

🗆 P	rocedure to	follow	if there	is a	fire	alarm	or	lock-do	wn
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□ Site specific health & safety updates (or other pandemic, disease outbreak information)

 $\Box$  Review of store safety pages e.g., how to call security, or assistance to pharmacy etc.

□ Information re: neighbourhood safety e.g., late-night departure

#### Patient Safety

	Introduction	to site's	medication	incident	policy
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□ Introduction to quality assurance/ medication safety programs followed by the community pharmacy

#### Dress Code

	Review	of site'	s dress	code	policy	(including	footwear)
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□ Student wearing an ID badge that clearly identifies them as a pharmacy student

□ Student has reviewed the COVID-19 resources on Brightspace and/or any site-specific resources for the donning and doffing of PPE

#### Privacy Policy

□ Site's privacy policy reviewed

□ Process to access patient profiles

 $\Box$  Private counselling room



#### **Pharmacy Student Emergency Contact Information**

#### Pharmacy 2082 Practice Experience Program

\* Students please complete this form and provide to your preceptor on the first day of your Practice Experience Program Rotation

Student Name: \_\_\_\_\_

In case of emergency please notify the following person:

Name:	
Address:	
Daytime Phone Number: Area Code: (	
Evening Phone Number: Area Code: (	)
Relationship to student:	

**College of Pharmacy Contact Information Spring/Sumer 2021** 

Working off-campus due to COVID-19

Coordinator of Clinical Education, Harriet Davies: <u>Harriet.Davies@dal.ca</u>

Administrative Secretary, Tracy Jollymore: <u>Tracy.Jollymore@dal.ca</u>

General PEP Inquiries: <a href="mailto:pepadm@dal.ca">pepadm@dal.ca</a>

#### Summary of Major Required Activities for PEP 2082

### The College of Pharmacy recognizes that COVID-19 may lead to adjustments in onsite activities and supports this if needed.

- □ Preceptor to receive & review student resume & letter of introduction prior to start of rotation.
- □ **Obtain and post student license in pharmacy where required by law.** Pharmacy Students must also have personal professional liability insurance where required by Pharmacy Act.
- □ Important practice supervision reminder reviewed and discussed at the start of the rotation.
- $\Box$  Orientation of student to the practice site by the preceptor.
- $\hfill\square$  Review of student's onsite self-assessment at start of the rotation.
- □ Regular daily constructive/formative feedback provided.
- □ Mid-point student self-assessment & preceptor assessment of student completed & reviewed onsite.
- □ Final student self-assessment & preceptor assessment of student completed & reviewed onsite.
- □ **<u>NEW:</u>** Online final grade assessment completed along with online feedback forms, links will be emailed to preceptors and posted on Brightspace for students.
- Regular participation by student in patient care activities in the prescription and non-prescription areas of the practice site under the appropriate supervision of the pharmacist preceptor e.g., non-Rx & Rx counseling every day; medication reviews; minor ailments/pharmacist assessment & prescribing etc. as appropriate for the therapeutic areas covered thus far in the second-year curriculum.
- Students must have completed and reviewed with their preceptor onsite the Unit 2 PHAR
   2082 Patient Care Interaction Feedback Checklists for at least:
  - o Four non-prescription (OTC) recommendations
  - Four prescription counsels

#### **UNIT 1 - PROFESSIONAL AND INTERPERSONAL SKILLS**

This unit involves a fulfillment of objectives as a continuum over the course of all practice experience program (PEP) rotations. PEP rotations provide opportunities for students to continue to develop professional and interpersonal skills in "real-life" practice settings. The expected level of competence displayed for second year rotations should be consistent with a student who is two years away from entry to practice as a pharmacist.

**PRECEPTORS:** Please see the curriculum overview chart in this manual for a summary of the professional practice topics that have been covered by a second-year student. Pharmacy Students must always practice under the appropriate supervision of a licensed Pharmacist preceptor see page 3.

#### **<u>References</u>**:

- 1. Professional Competencies for Canadian Pharmacists at Entry to Practice, NAPRA, March 2014
- 2. Nova Scotia College of Pharmacists Pharmacist's Code of Ethics: https://www.nspharmacists.ca/?page=codeofethics
- 3. New Brunswick College of Pharmacists Code of Ethics: https://www.nbpharmacists.ca/site/codeofethics
- 4. PEI College of Pharmacists Code of Ethics: https://pei.in1touch.org/uploaded/web/PEICP%20COE%20Final%20March%202017.pdf
- 5. Model Standards of Practice for Canadian Pharmacists, NAPRA, March 2009

#### Learning Objectives (AFPC EDUCATIONAL OUTCOME in brackets):

Upon completion of the rotation, the pharmacy student is expected to be able to:

- communicate effectively in diverse practice settings or patient situations (CARE PROVIDER; PROFESSIONAL);
- demonstrate professionalism during all pharmacy practice activities (PROFESSIONAL);
- demonstrate skills of self-reflection, self-assessment and self-improvement (PROFESSIONAL);
- o demonstrate skills of self-motivation and initiative (PROFESSIONAL);

at a level appropriate for a student who has completed two out of four years of pharmacy studies.

#### Self-Assessment/Assessment Criteria:

- Demonstrates commitment to each patient regardless of race, religion, sex, gender, gender identity, gender expression, sexual orientation, age, health, cultural or educational background or economic status
- Presents them self in a professional manner at all times; always verbally identifies them self as a Pharmacy Student and wears a nametag that identifies them as a Pharmacy Student
- Displays appropriate verbal, non-verbal, writing & listening skills with patients, colleagues and other health care professionals
- Able to adapt communication to the needs of the patient
- Displays sensitivity, compassion, respect & empathy to patient concerns
- Follows an organized thought process to assess a patient and make a therapeutic recommendation
- Follows required dress code
- Is reliable and punctual
- Completes tasks carefully & thoroughly
- Respects patient confidentiality
- Displays a positive attitude toward pharmacy practice
- Shows interest and takes initiative
- Demonstrates good organization & time management skills
- Maintains appropriate professional boundaries
- Accepts responsibility for actions and decisions
- Uses feedback to improve performance
- Completes extra reading or assignments when suggested

#### **UNIT 2 – PATIENT CARE IN THE COMMUNITY PHARMACY**

Pharmacy practice legislation and regulations throughout Canada have been updated in the past few years and pharmacists have many options available to help patients in the community pharmacy. Pharmacy students are expected to work with their pharmacist preceptors to experience the full scope of pharmacy practice in the province of their rotation. The pharmacy student should feel comfortable with the use of a systematic approach to patient assessment and care for the therapeutic areas they have covered thus far in the pharmacy curriculum and should receive regular feedback from their preceptor about the supervised care they provide throughout the rotation. Students should review with their preceptor how they plan to provide advice to patients in the community pharmacy. **Preceptors must be sure that students are providing patient care under the appropriate supervision of a pharmacist at all times.** 

#### **Reference:**

https://www.pharmacists.ca/pharmacy-in-canada/scope-of-practice-canada/

#### A Note for Preceptors

Due to COVID-19 postponements, students in the Class of 2022 (third years) are completing this secondyear course following the completion of their third year of pharmacy studies. Please see page 8 of this manual for an overview of the curriculum students have covered. Please also review the student's past work experience in community pharmacy to determine the culmination of their learning and practice experience they will bring to this course.

#### Learning Objectives:

#### At the end of the rotation the student will be able to:

- describe the role of community pharmacists as providers of patient care (CARE PROVIDER);
- describe when a community pharmacist could prescribe a medication (CARE PROVIDER);
- Iocate and review the standards of practice for pharmacist prescribing in the province of their rotation (if applicable) (PROFESSIONAL);
- describe what is required to obtain informed consent from a patient (PROFESSIONAL);
- demonstrate an organized approach to providing patient care and advice in a community pharmacy setting (CARE PROVIDER);
- describe and reflect upon the experience of providing patient care (under the appropriate supervision of a preceptor) to patients seeking assessment and advice in a community pharmacy (CARE PROVIDER);
- demonstrate an ability to document patient care using the electronic health records of a community pharmacy (LEADER-MANAGER; CARE PROVIDER);
- provide examples of when it may be necessary to refer/triage patients (under the appropriate supervision of a preceptor) and advise patients to seek further health care beyond the advice available in a community pharmacy from a pharmacist (CARE PROVIDER; PROFESSIONAL);
- describe the role of community pharmacists (CARE PROVIDER; PROFESSIONAL) when supporting patients navigating drug recalls or shortages in Canada.

### at a level appropriate for a student who has completed two out of four years of pharmacy studies.

#### **Activities**

- a. Review the medications available to be recommended or prescribed by a pharmacist in the province of your rotation. Review the prescription medication storage layout; the behind the counter non-prescription medications and the medications located in the pharmacy public access area. Take time to become familiar with brand and generic names and the location of specific products in the pharmacy. Make sure you understand the pharmacy's layout and organization of product categories.
- b. Identify and discuss with your preceptor the following information for selected medication categories\*(please see list of topics covered in second year that follows):
  - i. Drug schedules and associated professional requirements
  - ii. Indication for use and desired outcomes of therapy
  - iii. Options available (variety of products)
  - iv. Comparison of advantages and disadvantages of products in this class
  - v. Potential drug-related problems
  - vi. Contraindications to medication use
  - vii. Appropriate patient education and advice
  - viii. Monitoring parameters (who would monitor; what should be monitored)
  - ix. Situations where patients should be referred to another health care professional rather than self-treat their condition
  - x. Opportunities for pharmacists to assess and prescribe medications as part of patient care
  - xi. Any appropriate non-drug therapy advice

\*Medication categories should be selected from the list below:

- □ Acetaminophen/ibuprofen dosing for pediatrics (by weight)
- □ Anthelmintics and antiparasitics pinworms; threadworms; lice (excludes scabies)
- □ Antibiotics for some infections: otitis media, pneumonia, pharyngitis, exacerbation of COPD, skin and soft tissue infections, conjunctivitis, traveler's diarrhea, C. diff diarrhea, lyme disease
- $\Box$  Asthma therapy
- $\Box$  COPD therapy
- □ Influenza
- □ Sunscreens
- □ Antihistamines/allergic rhinitis and conjunctivitis; insect bites
- □ Infant products: diaper dermatitis, formula, colic
- $\Box$  Cough and cold
- □ Eye and ear products
- □ Motion sickness
- □ First aid topical antiseptics and topical antibiotics
- $\Box$  Foot products for corns, callouses, warts
- □ GI medications (e.g., antacids, antidiarrheals, laxatives, anti-emetics, hemorrhoids) including constipation and diarrhea, adult and pediatric nausea and vomiting, IBS, PUD, GERD, IBD medications
- □ Skin care (acne, dandruff, eczema, dry skin, insect bites; psoriasis therapies mainly topical steroids, topical calcineurin inhibitors)
- □ Vaginal and fungal therapies (also cover fungal therapies for athlete's foot and oral candidiasis)
- □ Vitamins and minerals including iron preparations

A <u>minimum of five</u> categories from the list above should be covered by the student over the two weeks of rotation.

Each student must complete ONSITE a *Patient Care Feedback Checklist* (see forms at the end of this unit) documenting feedback obtained from and reviewed with their preceptor on the following types/number of patient interactions:

- ✓ Four non-prescription (OTC) recommendations
- ✓ Four prescription consultations/counsels
- c. Accompany your preceptor and observe while they assess and provide advice to patients who require care from a pharmacist. Are pharmacists required to use a private consultation room for all patient assessments? Are there any standards describing the type of patient consultation room required for pharmacist assessment and/or prescribing? How does the pharmacy obtain the patient's consent to receive care? Does the pharmacy use a patient privacy and consent form?
- d. Once the student and preceptor are comfortable with the categories covered, students should be provided with the opportunity to assess and advise patients requiring care from a pharmacist. This must be done under the appropriate supervision of the preceptor. Students should complete any required electronic health record documentation under the appropriate supervision of the preceptor and their work must always be co-signed when charted or documented in the community pharmacy setting. Preceptors and students will need to confirm the following were completed and feedback reviewed onsite:
- ✓ Four non-prescription/OTC recommendations
- ✓ Four prescription consultation/counsels
- e. Following each patient care interaction students should reflect on the encounter, information provided and if there is anything different, they would do next time? Students should also receive regular feedback from their preceptor following the provision of patient care.
- f. As you gain experience with providing supervised care to patients, review with your preceptor when it is necessary to triage or refer patients for further care.
- g. Review with your preceptor what types of patient follow up is completed in the pharmacy. How does patient follow-up get documented? Students will learn more about follow-up and monitoring during third- and fourth-year skills lab and rotations.

#### PRESCRIPTION MEDICATIONS

#### Learning Objective:

#### At the end of the rotation the student will be able to:

provide medication information and advice to patients focusing on therapeutic topic areas covered in second year\* under the appropriate supervision of their preceptor (CARE PROVIDER);

### at a level appropriate for a student who has completed two out of four years of pharmacy studies.

#### **Activities**

- a. Observe (with the patient's consent) while your preceptor or another pharmacist educates and advises patients about prescription medications.
- b. Select, with the help of your preceptor, medications and devices that are appropriate for you to provide patient information/advice about and that are likely to arise as new prescriptions at your site. Review with your preceptor the specific information that should be provided to the patient about these medications/devices.

### <u>\*Therapeutic topics that have been covered in second year include:</u> > topical products (eye & ear and derm)

- respiratory tract complaints
  - i. Students should attempt to educate patients on the proper use of common inhalation devices found in a community pharmacy
- nutrition
  - > gastrointestinal disorders

\*please see list of topics covered on page 20

- c. <u>If needed</u>: Conduct practice sessions using these selected medications and devices. Have your preceptor act as the patient receiving a prescription and obtain their feedback on your strategy/technique used to provide patient information and education.
- d. Under the appropriate supervision of your preceptor, educate and advise patients on the proper use of their prescription medications. Review and reflect on your patient care experience with your preceptor.

PHAR 2082 Patient Care Interaction Feedback Checklist
Preceptor: Date:
Pharmacy Student:
Non-Prescription/OTC Assessment &/or Recommendation(s)
Prescription Consultation/Counsel
Other:
Medications Covered:
Patient
Age: Chief Complaint:
New Assessment
Follow-up Assessment
Communications
Introduces self & purpose of communication with patient
Appropriate non-verbal communication used     Displays an extra the state factions are expressive.
Displays empathy and reflects feelings as appropriate
Uses appropriate questioning techniques (e.g. open and closed, clarification etc.)
Communication was organized yet flexible
Explanation is logical and involves patient
Overall tone & style was appropriate Therapeutics
Assessment & background information gathered
DRPs identified/ruled out
Appropriate recommendation made (if needed)
Provides patient centred education
What went well Student Self-Assessment:
Preceptor Assessment:
Things to consider for next time
Preceptor Signature Student Signature

PHAR 2082 Patient Care Interaction Feedback Checklist		
Preceptor: Date:		
Pharmacy Student:		
Non-Prescription/OTC Assessment &/or Recommendation(s)		
Prescription Consultation/Counsel		
Other:		
Medications Covered:		
Patient		
Age: Chief Complaint:		
New Assessment		
Follow-up Assessment		
Communications		
□ Introduces self & purpose of communication with patient		
Appropriate non-verbal communication used		
<ul> <li>Displays empathy and reflects feelings as appropriate</li> </ul>		
Uses appropriate questioning techniques (e.g. open and closed, clarification etc.)		
Communication was organized yet flexible		
Explanation is logical and involves patient		
Overall tone & style was appropriate Therapeutics		
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□ DRPs identified/ruled out		
Appropriate recommendation made (if needed)		
Provides patient centred education		
What went well Student Self-Assessment:		
Preceptor Assessment:		
Things to consider for next time		
Preceptor Signature Student Signature		

PHAR 2082 Patient Care Interaction Feedback Checklist		
Preceptor: Date:		
Pharmacy Student:		
Non-Prescription/OTC Assessment &/or Recommendation(s)		
Prescription Consultation/Counsel		
Other:		
Medications Covered:		
Patient		
Age: Chief Complaint:		
New Assessment		
Follow-up Assessment		
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Appropriate recommendation made (if needed)		
Provides patient centred education		
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Preceptor Assessment:		
Things to consider for next time		
Preceptor Signature Student Signature		

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Prescription Consultation/Counsel
Other:
Medications Covered:
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New Assessment
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Prescription Consultation/Counsel
Other:
Medications Covered:
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Age: Chief Complaint:
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PHAR 2082 Patient Care Interaction Feedback Checklist		
Preceptor: Date:		
Pharmacy Student:		
Non-Prescription/OTC Assessment &/or Recommendation(s)		
Prescription Consultation/Counsel		
□ Other:		
Medications Covered:		
Patient		
Age: Chief Complaint:		
New Assessment		
Follow-up Assessment		
Communications		
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Appropriate non-verbal communication used     Displays expective and reflects factions as expressions		
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DRPs identified/ruled out		
Appropriate recommendation made (if needed)		
Provides patient centred education		
What went well Student Self-Assessment:		
Presenter Assessment:		
Preceptor Assessment:		
Things to consider for next time		
Preceptor Signature Student Signature		

PHAR 2082 Patient Care Interaction Feedback Checklist		
Preceptor: Date:		
Pharmacy Student:		
Non-Prescription/OTC Assessment &/or Recommendation(s)		
Prescription Consultation/Counsel		
Other:	_	
Medications Covered:	_	
Patient		
Age: Chief Complaint:		
New Assessment		
Follow-up Assessment		
Communications		
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What went well Student Self-Assessment:		
Preceptor Assessment:		
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Preceptor Signature Student Signature		

PHAR 2082 Patient Care Interaction Feedback Checklist		
Preceptor: Date:		
Pharmacy Student:		
Non-Prescription/OTC Assessment &/or Recommendation(s)		
Prescription Consultation/Counsel		
□ Other:		
Medications Covered:		
Patient		
Age: Chief Complaint:		
New Assessment		
Follow-up Assessment		
Communications		
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Assessment & background information gathered		
DRPs identified/ruled out		
Appropriate recommendation made (if needed)		
Provides patient centred education		
What went well Student Self-Assessment:		
Presenter Assessment:		
Preceptor Assessment:		
Things to consider for next time		
Preceptor Signature Student Signature		

#### **UNIT 3 - COMPOUNDING**

#### **Activities**

#### Learning Objective:

#### At the end of the rotation the student will be able to:

- describe and apply the professional requirements for preparing and dispensing compounded prescriptions (PROFESSIONAL; LEADER-MANAGER);
- prepare and/or help to prepare compounded prescriptions (under the appropriate supervision of the preceptor) (CARE PROVIDER);

### at a level appropriate for a student who has completed two out of four years of pharmacy studies.

- With your preceptor's guidance, review the provincial Pharmacy Act/Regulations and/or Standards of Practice for dispensing compounded prescriptions in your province.
- Please visit the NAPRA website and review the available documents related to pharmacy compounding in Canada: <u>www.napra.ca</u> (search: compounding to retrieve documents) Please Note: NAPRA's suite of model standards for pharmacy compounding comprises three model standards, with one pertaining to non-hazardous sterile preparations, one to hazardous sterile preparations, and one to non-sterile preparations.

### Students, please complete the following questions outside of your rotation time and review your answers with your preceptor.

#### **Questions:**

- 1. What types of compounded drug products must be prepared in a sterile environment? Are there provincial regulations and or national standards of practice available for sterile compounding in community practice? Where would a patient be able to obtain a sterile compounded product if needed in the community?
- 2. What are some of the common types of compounds prepared at the rotation site?

Students should participate in compounding activities under the appropriate supervision of their pharmacist preceptor as part of normal patient care activities in the dispensary. For any products that are compounded during the student's rotation the following points should be reviewed:

- Review of relevant provincial and/or national standards that would apply to type of compounding being performed
- Calculations used in determining the amount of ingredients
- Compounding procedures
- Use of the equipment in the dispensary
- Additional ingredients used to enhance the mixing/compounding procedure
- Precautions to follow when preparing and handling the ingredients and final product
- Specific storage requirements
- Expiry date of the preparation (is there a reference for the expiry date provided?)
- Information on the label
- Pharmacy documentation procedures followed e.g., compounding log or worksheet
- 3. Locate a formula for the following compounded oral products. Discuss with your preceptor the resource used to obtain the formula. Would they use that formula in their practice?
  - metroNIDAZOLE oral suspension 10 mg/mL
  - hydrochlorothiazide oral suspension 5 mg/mL
- 4. Source the ingredients for the above suspensions. Where and how quickly can you obtain the ingredients if they are not in stock?
- 5. If a prescription was received for a compound and the pharmacy was able to prepare the compound:
  - a. Who would prepare the product?
  - b. Where in the pharmacy would the product be compounded?
  - c. Who would complete the calculations for the compounded preparation?
  - d. How would the calculations be double-checked?
  - e. What type of record would be kept of the compound's preparation?
  - f. How would the product be labeled? What auxiliary labels would be used?
  - g. How is the expiry date for the compounded product determined?
- 6. If you were not able to assemble the ingredients within a reasonable timeframe for a compound discuss with your preceptor where and how you should refer the patient. Should the referral process be documented?
#### **UNIT 4 - DRUG INFORMATION**

In the second year Critical Appraisal Series (CAS), students learn about the effective use of various drug information resources both printed and electronic and how to respond to drug information requests. Students learn how to do on-line searches to obtain relevant articles and the beginnings of how to critically appraise those articles. In Skills Lab, students complete practice drug information questions. For some students, this rotation may be their first experience answering drug information questions in a practice environment. Students can access the Dalhousie Kellogg Library remote access system from any internet web browser page. The link for remote access is:

https://libraries.dal.ca/

#### Learning Objective:

#### At the end of the rotation the student will be able to:

assess and answer one prescription and one non-prescription drug information request encountered during the rotation that contributes to or supports patient care (SCHOLAR);

# at a level appropriate for a student who has completed two out of four years of pharmacy studies.

<u>Please Note:</u> Extra research time may be required by students outside of regular pharmacy rotation hours to successfully complete this unit.

#### **Activities:**

- a. Complete an orientation to the community pharmacy's drug information resources.
- b. Complete at least two drug information requests: one prescription and one non-prescription related drug information request as coordinated by the preceptor. The student should complete questions that arise from and contribute to the patient care needs of the pharmacy practice. Requests may originate from:
  - ➤ the preceptor
  - other health care professionals
  - > patients

Use the following steps as a guide to help you complete the drug information request:

- Receive and understand the question.
- Search for the data.
- Analyze the data and formulate a response. Integrate the information obtained from several sources, and critically evaluate the appropriateness of each source in relation to the information requested.
- Communicate the response: at least one verbally **<u>and</u>** one in writing.

- Communicate responses as appropriate to the requester (under the appropriate supervision of your preceptor).
- Provide a clear and concise response that is referenced appropriately.
- Follow-up as required.

A sample DI Request Form is included with this unit for the student to use or they may use another one of their choice or one used by the rotation site.



# SAMPLE: PEP Drug Information Request/Response Form

<b>Requester</b>					
Address					
Fax					
ASAP 🗖	Today 🗖	1-2 Days 🗖	No Rush 🗖		
Source of Ro Health Profes	ssional:	urse 🗆 Pha	armacist	□ Patient	□ Other

Background Information (age, weight, disease states, medications, lab values, allergies etc.):

# **Ultimate Question:**

Type of Request		
Administration	Formulation	Pharmaceutics
Adverse effect	ID/availability	Pharmacology
Alternative therapy	Interaction	Pregnancy/lactation
Biopharmaceutics	Law/regulation	Professional issues
Compatibility/stability	Lecture	Therapeutics
Copy of article	Library	Toxicity
Cost	Monograph	Other
Dosage	Patient information	

**Response (use additional paper if needed):** 

# **References:**

#### Learning Objectives:

#### At the end of the rotation the student will be able to:

- discuss the basic principles of third-party insurance plans (LEADER-MANAGER);
- discuss what types of medication coverage resources are available to patients in a community pharmacy practice setting (LEADER-MANAGER; ADVOCATE);

# at a level appropriate for a student who has completed two out of four years of pharmacy studies.

#### **Activities**

- a. Review with your preceptor the discussion topics and questions provided below.
- b. Participate in the submission and adjudication of third-party insurance claims as part of regular pharmacy activities. Learn how to enter patient third party insurance information into the patient profile. Review a variety of insurance adjudication screens to learn how to interpret, apply, and problem solve therapeutic issues that may arise from insurance claims.

#### **Discussion Topics and Questions**

- 1. What are third party drug plans?
- 2. What is a "co-pay"? Are all co-pays the same?
- 3. What is a deductible? Where would you find out more information on a patient's deductible?
- 4. What is a premium?
- 5. Who calls insurance providers to solve any insurance related problems in the pharmacy?
- 6. What type(s) of insurance plan problems would require the patient to call the insurance provider directly?

- 7. Does each third-party plan cover the same professional fee?
- 8. Does every plan pay for an unlimited "days' supply" of medications?
- 9. Review with your preceptor how requests for changes in prescription quantity should be handled?
  - a. If the patient wants less than the amount prescribed?
  - b. If the patient wants all the refills at once?
  - c. Would your answer change if the type of medication changed?
- 10. While less of an issue during COVID-19 travel restrictions: please discuss with your preceptor what days' supply options are available to seniors who travel south in the winter from your province. Can a package of prescription medication be mailed or shipped to the USA?
- 11. How is the price for medications and the professional fee determined? What type of mark-up is placed on prescription medications? Do all drug plans pay all submitted costs, mark-ups and fees? Is the difference always charged to the patient?
- 12. Do insurance plans reimburse patients for any professional services provided by pharmacists e.g., therapeutic substitution; assessment of minor ailments; prescription adaptation etc. Will insurance plans pay for prescriptions ordered by pharmacists?
- 13. Review a third-party transmission screen and discuss with your preceptor or delegate how a difference in submission cost/fee should be handled?
- 14. What process is followed in the pharmacy if a patient is not able to afford a medication ordered by prescription? If a patient refuses or declines to obtain a medication ordered by prescription is this documented? Is the prescriber contacted? What happens if the patient needs a medication, but the patient cannot afford the medications and going without the medication could cause the patient harm? How should a pharmacist manage this situation? Are pharmacy assistants or technicians required to involve the pharmacist in such a situation?
- 15. What resources or programs are available to patients in your province to help them access medications they cannot afford, or their third-party insurance plan will not cover? Resources to consider include:
  - Provincial diabetic supply programs
  - Cancer care medication programs
  - Community services
  - Medication samples
  - Pharmaceutical company compassionate use programs

- Provincial government sponsored insurance plans for the under-insured or non-insured individual e.g., Trillium Drug Program in Ontario, Family Pharmacare in Nova Scotia, The New Brunswick Drug Plan etc.
- Community based charities
- MS medication programs
- HIV medications including HIV Pre. Exposure Prophylaxis (PrEP) provincial coverage programs

# PRODUCT SELECTION & INTERCHANGEABILITY

#### Learning Objective:

#### At the end of the rotation the student will be able to:

 locate and apply the medication product selection and interchangeability regulations in place for the province of the rotation (LEADER-MANAGER);

at a level appropriate for a student who has completed two out of four years of pharmacy studies.

#### **Activities**

- a. Review any legislation related to product selection/interchangeability in your province.
- b. Review possible professional liability concerns related to product selection.

#### Learning Objective:

#### At the end of the rotation the student will be able to:

- locate and use the provincial medication formulary for the province of their rotation (LEADER-MANAGER);
- describe when and where formulary updates are provided (LEADER-MANAGER);

# at a level appropriate for a student who has completed two out of four years of pharmacy studies.

#### **Activities**

- 1. Review the organization of the provincial medication formulary to become familiar with formulary use and application in pharmacy practice.
- 2. Discuss with your preceptor an approach for and factors affecting decisions regarding prescription medication interchangeability in community practice. In particular how does the pharmacy decide which interchangeable generic products will be stocked?
- 3. How are pharmacists and pharmacy staff notified of changes to the provincial drug formulary?
- 4. Review with your preceptor how the pharmacy decides which interchangeable generic brands will be carried. What happens if a preferred brand is short? Are there any reliable resources available to pharmacists to monitor and manage medication shortages? How are changes in brand documented? How is the patient notified of a generic brand change?
- 5. In provinces that have criteria codes and exception status drugs within provincially sponsored drug plans, review the process that must be followed to secure coverage of these drugs for patients.



## COLLEGE OF PHARMACY ONSITE STUDENT SELF-ASSESSMENT PHAR 2082 (Community) PEP

#### Pharmacy 2082 (Community Pharmacy) PEP

Please take a moment to complete this self-assessment prior to your arrival on site, and before your midpoint and final assessments during your Pharmacy 2082 rotation. Read each statement on the left of the chart and select a description from the self-assessment scale that best reflects how prepared you are to practice the skill(s) described. Note the number of your selection below the appropriate time (PRE = initial selfassessment, MID=mid-point check-in & END=final). If you are not able to self-assess the described skill (s) please use the notation "NA". In some parts of the self-assessment, you may be prompted to answer yes or no.

During your rotation student assessments are intended to help facilitate a constructive dialogue about strengths, weaknesses and areas for improvement. The expected level of competence displayed for second year rotations should be consistent with a student who has completed 2 out of 4 years of professional studies.

Students must review their initial self-assessment at the start of the rotation with the preceptor. A student's initial self-assessment will reflect their past PEP (Practice Experience Program), PBL (Problem Based Learning) group work, CAS (Critical Appraisal Skills) learning, skills lab learning and pharmacy work experiences. A review of the student's initial self-assessment will provide information that allows the rotation to be tailored to suit the learning needs of the student. Preceptors assign a grade of pass or fail at the conclusion of the rotation.

#### If at any time a preceptor has identified that a student may not successfully complete the rotation, the Coordinator of Clinical Education must be contacted as soon as the potential for this concern is identified.

#### <u>Students must clearly identify as a Pharmacy Student during all professional interactions and must</u> work at all times under the appropriate supervision of a Pharmacist Preceptor.

Student Self-Assessment Scale

- 1 Needs further development: please provide suggestions/further details
- 2 At expected level of practice
- 3 Above expected level of practice

"...for a Pharmacy Student who has completed 2 out of 4 years of professional studies" N/A- Not able to assess <u>or</u> answer the yes or no prompts provided. Student is licensed as a *Registered Pharmacy Student* in the province of the rotation & holds personal professional liability insurance. YES \_\_\_\_\_NO \_\_\_\_ (rotation cannot start until license & insurance in place) Appropriate paperwork filed with pharmacy regulator for rotation YES \_\_\_\_NO \_\_\_\_ (NB & PEI)

Appropriate paperwork filed with pharmacy regulator for rotation YESNO (NB & PEI)				
Self-Assessment Scale	1 Needs Further Development: Please provide suggestions/further details	2 At Expected	3 Above Expected	
In some areas of the <i>Professional and Int</i> the option of answering yes or no to <i>Please provide suggestion</i>	the self-assessment/ass	essment criteria may	be preferred.	
Time of Assessment	PRE	MID-POINT CHECK-IN	FINAL	
Unit 1 - Professional & Interpersonal Skill	S			
Demonstrates commitment to each patient regardless of race, religion, sex, gender, gender identity, gender expression, sexual orientation, age, health, cultural or educational background or economic status				
Presents them self in a professional manner at all times; always verbally identifies them self as a Pharmacy Student and wears a nametag that identifies them as a Pharmacy Student				
Displays appropriate verbal, non-verbal, writing & listening skills with patients, colleagues and other health care professionals				
Follows an organized thought process to assess a patient and make a therapeutic recommendation				
Able to adapt communication to the needs of the patient				
Displays sensitivity, compassion, respect & empathy to patient concerns				
Follows required dress code	$\Box$ YES $\Box$ NO	$\Box$ YES $\Box$ NO	$\Box$ YES $\Box$ NO	
Is reliable and punctual	$\Box$ YES $\Box$ NO	$\Box$ YES $\Box$ NO	$\Box$ YES $\Box$ NO	
Completes tasks carefully & thoroughly				
Respects patient confidentiality	$\Box$ YES $\Box$ NO	$\Box$ YES $\Box$ NO	$\Box$ YES $\Box$ NO	
Displays a positive attitude toward pharmacy practice				
Shows interest and takes initiative				
Demonstrates good organization & time management skills				

Maintains appropriate professional boundaries		
Accepts responsibility for actions & decisions		
Uses feedback to improve performance		
Completes extra reading or assignments when suggested		

Activities & Questions (document when completed)			
<b>Unit 2</b> –Patient Care in the Community Pharmacy	: # categor	ies reviewed	
	Questions/Activitie	s Completed:	
	□YES	□NO	
Unit 3 – Compounding	□YES	□NO	
<ul> <li>Unit 4 – Drug Information</li> <li>1 Rx DI Question</li> <li>1 non-Rx DI Question</li> </ul>	□YES	□NO	
Unit 5 – Medication Coverage	Questions/Activities Completed:□YES□NO		

Student's Written Comments / Notes for Preceptor: Pre-Rotation:

# Mid-Point Check-in:

# Final:

Preceptors, please submit the final grade assigned using the ONLINE assessment link provided by email.

Mid-Point Assessment Review Date: \_\_\_\_\_\_ Preceptor's Signature: \_\_\_\_\_\_ Student's Signature:

Final Assessment Review Date: \_\_\_\_\_ Preceptor's Signature: \_\_\_\_\_ Student's Signature: \_\_\_\_\_

FOR SUMMER 2021 & DUE TO COVID-19: Please hold onto all onsite assessment paperwork. Preceptors will be submitting a final grade and course feedback using the assessment link provided by email. Students will be providing course feedback via Brightspace.



#### COLLEGE OF PHARMACY PRECEPTOR ONSITE ASSESSMENT OF THE STUDENT PHAR 2082 (Community) PEP

#### Pharmacy 2082 (Second Year Community) PEP

Please take a moment to complete this assessment and be prepared to discuss the results with your student after reviewing and discussing the student's mid-point check-in and final self-assessments. Please read each statement on the left of the chart. Select a rating from the assessment scale provided that best reflects what you have observed about the student's ability to demonstrate that skill during the rotation. Note your selection below the appropriate time (PRE = initial self-assessment, MID=mid-point check-in & END=final). If you are not able to assess the described skill (s) please use the notation "NA". In some parts of the self-assessment, you may be prompted to answer yes or no.

Assessments are intended to be part of a constructive dialogue between you and your student about strengths, weaknesses and areas for improvement. The expected level of competence displayed for second year rotations should be consistent with a student who has completed 2 out of 4 years of professional studies.

**Completion of the column marked "PRE" is not required by preceptors.** The student will review their initial self-assessment at the start of the rotation with the preceptor. The student's initial self-assessment in second year will reflect their past PEP (Practice Experience Program), PBL (Problem Based Learning) group work, CAS (Critical Appraisal Skills) learning, skills lab learning and personal pharmacy work experiences. A review of the student's initial self-assessment at the start of the rotation helps provide information that will allow the rotation to be tailored to suit the learning needs of the student.

#### If at any time a preceptor has identified that a student may not successfully complete the rotation, the Coordinator of Clinical Education must be contacted as soon as the potential for this concern is identified.

#### <u>Students must clearly identify themselves as a Pharmacy Student during all professional</u> interactions and must work at all times under the appropriate supervision of a Pharmacist Preceptor.

Student Self-Assessment Scale	
1-	Needs further development: please provide suggestions/further details
2-	At expected level of practice
"for a Pharmacy Student who has com	Above expected level of practice <b>pleted 2 out of 4 years of professional studies</b> " <u>or</u> answer the yes or no prompts provided.

Student is licensed as a *Registered Pharmacy Student* in the province of the rotation & holds personal professional liability insurance. YES \_\_\_\_\_NO \_\_\_\_ (rotation cannot start until license & insurance in place) Appropriate paperwork filed with pharmacy regulator for rotation YES \_\_\_\_NO \_\_\_\_

Appropriate paperwork filed with pharmacy	regulator for rotation r		
Assessment Scale	1 Needs Further Development: Please provide suggestions/furthe r details	2 At Expected	3 Above Expected
In some areas of the <i>Professional and Inter</i> the option of answering yes or no to t <i>Please provide suggestions</i>	he self-assessment/as	sessment criteria may	be preferred.
Time of Assessment	PRE	MID-POINT CHECK-IN	FINAL
Unit 1 - Professional & Interpersonal Skills	5	-	-
Demonstrates commitment to each patient regardless of race, religion, sex, gender, gender identity, gender expression, sexual orientation, age, health, cultural or educational background or economic status			
Presents them self in a professional manner at all times; always verbally identifies them self as a Pharmacy Student and wears a nametag that identifies them as a Pharmacy Student			
Displays appropriate verbal, non-verbal, writing & listening skills with patients, colleagues and other health care professionals			
Follows an organized thought process to assess a patient and make a therapeutic recommendation			
Able to adapt communication to the needs of the patient			
Displays sensitivity, compassion, respect & empathy to patient concerns			
Follows required dress code		$\Box$ YES $\Box$ NO	$\Box$ YES $\Box$ NO
Is reliable and punctual		$\Box$ YES $\Box$ NO	$\Box$ YES $\Box$ NO
Completes tasks carefully & thoroughly			
Respects patient confidentiality		$\Box$ YES $\Box$ NO	$\Box$ YES $\Box$ NO
Displays a positive attitude toward pharmacy practice			
Shows interest and takes initiative			
Demonstrates good organization & time management skills			

Maintains appropriate professional boundaries	
Accepts responsibility for actions & decisions	
Uses feedback to improve performance	
Completes extra reading or assignments when suggested	

Activities & Questions (document when completed)			
<b>Unit 2</b> –Patient Care in the Community Pharmacy	: #	# categories reviewed	
	Questions/Activities Completed:		
	□YES	□NO	
Unit 3 – Compounding	□YES	□NO	
Unit 4 – Drug Information • 1 Rx DI Question • 1 non-Rx DI Question	□YES	□NO	
Unit 5 – Medication Coverage	Questions/Activities Completed:		
	□YES	□NO	

# Mid-Point Check-in:

#### Final:

Mid-Point Check-in Review Date:	
Preceptor's Signature:	
Student's Signature:	
Final Assessment Review Date:	_
Preceptor's Signature:	
Student's Signature:	
Final Grade for student's rotation (please submit ONLINE us	sing emailed link):
PASS	FAIL

<u>FOR SUMMER 2021 & DUE TO COVID-19:</u> Please hold onto all onsite assessment paperwork. Preceptors will be submitting a final grade and course feedback using the assessment link provided by email. Students will be providing course feedback via Brightspace.

# Summary of Major Required Activities for PEP 3081/2

- □ Please start this section after the first two-week course is complete.
- Regular participation by student in patient care activities in the prescription and nonprescription areas of the practice site under the appropriate supervision of the pharmacist preceptor e.g., OTC & Rx counselling every day; medication reviews; minor ailments/pharmacist assessment & prescribing etc.
- □ Minimum of three detailed medication reviews/workups\* completed \*Please note that these should be detailed medication reviews and are not equivalent to the shorter med reviews reimbursed in some provinces
- □ Complete question set about substance use disorders and discuss with preceptor
- DI questions completed that contribute to patient care at the site
- □ IPE interview activity completed (modifications may be required for COVID-19)
- □ <u>Unit Two:</u> Reimbursement for Professional Pharmacy Services & Distribution of Medications in Canada. (May adjust to student's prior community pharmacy experience.)
- □ Health promotion activity completed (modifications may be required due to COVID-19).
- □ Fourth year rotation goals drafted and reviewed with third year preceptor
- □ On-site mid-point & final assessments completed using paper assessment tools
- □ <u>NEW:</u> Required final electronic assessment by preceptor completed and returned to the College of Pharmacy within 7 days of the rotation using link sent by email
- □ <u>NEW:</u> Required course feedback submitted by student using Brightspace & preceptor using online survey tool link within 7 days of the end of the rotation.

#### PHAR 3081/2 Unit One: Professional and Interpersonal Skills

This unit continues on from the last course and involves a fulfillment of objectives as a continuum over the course of all practice experience program (PEP) rotations. PEP rotations provide opportunities for students to continue to develop professional and interpersonal skills in pharmacy settings where direct patient care is provided. The expected level of competence displayed for a Class of 2022 student completing this PHAR 3081/2 rotation should be consistent with a student 12 to 18 months away from entry to practice as a pharmacist, and who is completing the third year of their pharmacy degree.

Proof of continuing professional competency is a standard licensing requirement for pharmacists in Canada. Pharmacists are required to demonstrate the ability to self-assess and self-reflect throughout their professional career.

Due to the COVID-19 pandemic, patient care activities may need to be adapted while ensuring that pharmacy standards of practice are maintained. The College of Pharmacy supports your flexibility and creativity.

**PRECEPTORS:** Please see the curriculum overview chart in this manual for a summary of the curriculum covered by the end of third year. Pharmacy Students must always practice under the appropriate supervision of a pharmacist preceptor. Please review the practice supervision reminder at the start of this manual.

#### **<u>References</u>**:

Professional Competencies for Canadian Pharmacists at Entry to Practice, NAPRA, March 2014
 Nova Scotia College of Pharmacists - Pharmacist's Code of Ethics:

http://www.nspharmacists.ca/?page=codeofethics

3. New Brunswick College of Pharmacists – Code of Ethics:

https://www.nbpharmacists.ca/site/codeofethics

4. PEI College of Pharmacists – Code of Ethics:

http://pei.in1touch.org/uploaded/web/PEICP%20COE%20Final%20March%202017.pdf

5. Model Standards of Practice for Canadian Pharmacists, NAPRA, March 2009

#### Learning Objectives (AFPC EDUCATIONAL OUTCOME in brackets):

Upon completion of the rotation, the pharmacy student is expected to be able to:

- communicate effectively in diverse practice settings or patient situations (CARE PROVIDER);
- demonstrate professionalism during all pharmacy practice activities (PROFESSIONAL);
- demonstrate skills of self-reflection, self-assessment and self-improvement (PROFESSIONAL);
- o demonstrate skills of self-motivation and initiative (PROFESSIONAL);
  - at a level expected from a Pharmacy Student who is completing their first of three final undergraduate clinical rotations and is 7 to 12 months away from entry to practice entry to practice as a pharmacist

# Self-Assessment/Assessment Criteria:

- Licensed as a Registered Pharmacy Student in the province of the rotation prior to the start of the rotation; holds a technical permit for injections if rotation is located in Nova Scotia & has successfully completed injection training; obtained personal professional liability insurance where required by law; filed all appropriate preceptor/site forms with the pharmacy regulator where required by law (e.g., NB and PEI).
- Is approachable and accessible to patients, family members, caregivers and pharmacy team members.
- Demonstrates commitment to each patient regardless of race, religion, sex, gender, gender identity, gender expression, sexual orientation, age, health, cultural, educational background or economic status.
- Displays a helping ethic when interacting with patients, family members, caregivers and pharmacy team members.
- Shows respect for the dignity of the patient.
- Presents themself in a professional manner; always identifies themself as a pharmacy student and wears a nametag that identifies them as a pharmacy student.
- Displays appropriate verbal, non-verbal communication, writing and listening skills with patients, colleagues and other health care professionals within the pharmacy practice.
- Able to adapt communication to the needs of the patient, family member, caregiver, pharmacy team member or health care professional.
- Displays sensitivity, compassion, respect and empathy to patient concerns.
- Follows required dress code.
- Is reliable, punctual and follows agreed upon schedule.
- Completes tasks carefully and thoroughly.
- Respects patient confidentiality.
- Displays a positive attitude toward pharmacy practice.
- Shows interest and take initiative.
- Demonstrates critical thinking, analysis, and action that are based on ethical and legal principles.
- Demonstrates good organizational and time management skills.
- Maintains appropriate professional boundaries
- Acknowledges own professional limits and abilities
- Accepts responsibility for actions and decisions
- Practices time-management, stress-management, and adaptive skills
- Strives to continuously improve professional performance and knowledge
- Uses feedback to improve performance
- Completes extra readings or assignments when suggested or needed

#### PHAR 3081/2 Unit Two\*: <u>Reimbursement for Professional Pharmacy Services</u>

These questions are designed to be answered in any province or territory in Canada. This unit provides an opportunity for pharmacy students to learn more about pharmacy professional services and medication coverage (third party plans/insurance) in practice.

\*PLEASE NOTE: Students and preceptors are welcome to tailor this unit to the specific learning needs of the student. And build on the work done on his topic in the second year PHAR 2082 manual just completed. If a student has significant personal practice experience and knowledge of these topics, they may wish to spend more time on medication reviews/patient care activities.

Each practice site will differ in how much a pharmacist is engaged in the management of medication coverage issues. It is an area of pharmacy practice where pharmacy technicians and assistants can provide important support. Pharmacists require a good working knowledge of current medication coverage systems and insurance programs in their region to make appropriate medication recommendations, assist patients who struggle with non-adherence to medications due to economic constraints and to solve problems related to medication coverage that may limit a patient's access to medication if left unresolved.

# **Getting Started**

At the start of your rotation, locate and familiarize yourself with the drug formulary administered by the province of your rotation. Provincial medication formularies are available to review online. Make sure you understand how to access and use the medication formulary list when in the pharmacy. Take note of how the formulary medication list is arranged and the meaning of any abbreviations located beside the listed medications. In addition, you should know how to contact all commonly encountered insurance plans and understand what information would be required by the plan in order to assist you with a patient related question.

# **Learning Objectives:**

#### At the end of this unit pharmacy students will have:

- reviewed the types of medication coverage available to patients in the province of their rotation (CARE PROVIDER);
- reviewed the basic medication coverage principles and procedures followed by public and private insurance plans in Canada (PROFESSIONAL; LEADER-MANAGER);
- obtained information on how to assist patients who have little or no medication coverage (HEALTH ADVOCATE);
- reviewed the medication claims systems commonly used by a community pharmacy in Canada (LEADER-MANAGER);
- reviewed any current or impending pharmacy standards of practice changes in the province of the rotation and how such changes will contribute to pharmacists providing optimal patient care related the management of medications (PROFESSIONAL; CARE PROVIDER);
- reviewed current reimbursement through public or private insurance plans for full scope pharmacist professional services.
  - at a level expected from a Pharmacy Student who is completing their first of three final undergraduate clinical rotations and is 7 to 12 months away from entry to practice as a pharmacist

#### Questions

## PROVINCIAL GOVERNMENT DRUG PLAN FORMULARIES

- a. What is the "CADTH Common Drug Review"?
- b. Is the provincial drug formulary the document that determines the legal interchangeability of medications in the province of your rotation?
- c. Review online the provincial drug formulary for the province of your rotation and review how to determine whether a product is interchangeable.
- d. How are pharmacists and pharmacies notified of changes/addition/deletions to the provincial drug formulary?
- e. What happens when a drug listed as interchangeable on the provincial formulary is short from the manufacturer and only the brand name product is available? Could the pharmacy be reimbursed for the full cost of the brand name medication?
- f. How are pharmacy team members notified of drug shortages? Visit https://www.drugshortagescanada.ca/ and familiarize yourself with the information that is provided on the website. Learn about how recent drug shortages were managed in the practice.

#### **PROVINCIAL SENIORS' DRUG PLAN**

- a. What is the name of the provincial drug plan for seniors in your province?
- b. What is the "business year" for the seniors' plan?
- c. Who is eligible for coverage?
- d. How and when can patients register?
- e. When patients reach the age of eligibility and register for the seniors' drug plan, when will their coverage commence?
- f. Does every senior have to register for the provincial seniors' drug plan? Would you ever advise someone to opt out of the seniors' drug plan if this option was available?
- g. How much is the yearly premium for the seniors' medication plan in your province (the amount a person must pay to join)? Is it pro-rated for members who join later in the business year?
- h. What are the yearly deductibles and required co-pays for the seniors' plan?
- i. Is every medication ordered by prescription covered for seniors?
- j. Are any non-prescription medications covered?
- k. Are ostomy supplies covered?

- 1. What types of diabetes supplies are covered?
- m. Are any wound supplies (e.g., dressings, bandages) eligible for coverage?
- n. Are there days supplied limits on any medications?
- o. Will the provincial seniors' plan pay for a supply of medications when seniors travel during the winter (within Canada vs outside Canada)?
- p. Locate the list of medications that can be covered with the submission of an electronic special authorization/criteria code (or equivalent for the province of your rotation) submitted by the pharmacy when billing the prescription. Who can provide the code and what type of documentation would be required on a prescription to meet the audit standards of the provincial seniors' plan?
- q. Determine who you would call to confirm the status of a special authorization request for a senior. If the opportunity arises, take part in contacting the person/organization to determine the status of a patient's special authorization request.
- r. Is there a mechanism in place to submit requests to the seniors' plan for coverage of a medication needed by a patient that is not listed on the formulary?
- s. When a generic is listed for a medication, are there any possible scenarios that the seniors' plan would consider covering the full cost of a brand name medication for a patient?
- t. Would prescriptions written by pharmacists be covered on the seniors' plan?
- u. Will the seniors' plan pay for the assessment provided by a pharmacist to prescribe a medication?

## OTHER PROVINCIALLY FUNDED DRUG PLANS

- a. Does the province of your rotation offer provincially funded drug plans or drug coverage for any of the following?
  - i. Diabetes assistance programs for medications and supplies
  - ii. Insulin pumps and supplies for eligible patients under or over the age of 19 in the province of your rotation?
  - iii. MS Drugs
  - iv. Dialysis patients
  - v. HIV/AIDS medications
  - vi. Pre-Exposure Prophylaxis (PrEP) for HIV e.g., tenofovir and emtricitabine
  - vii. Income assistance
  - viii. Disability
  - ix. Palliative care
  - x. Hospice care
  - xi. Cancer care medications e.g., oral chemotherapy medications, Magic Mouthwash
  - xii. Citizens without private medication coverage e.g., Family Pharmacare (NS); NB Drug Plan (NB); Trillium Drug Plan (ON); OHIP+ (ON) etc.
  - xiii. TB medication (treatment/prophylaxis)

- xiv. Clozapine
- xv. Transplant medications
- xvi. High-cost drug programs
- xvii. Medical cannabis
- xviii. Naloxone; buprenorphine/naloxone
- xix. Mifegymiso
- xx. Medical Assistance in Dying
- xxi. IV medications administered in the home or via government funded continuing care or home care
- b. Immunizations administered through pharmacies e.g., COVID-19 vaccines; Influenza vaccine; grade 7 vaccines etc.

#### FEDERALLY FUNDED DRUG COVERAGE

#### **Interim Federal Health Program (IFHP)**

- a. What is the Interim Federal Health Program (IFHP) and who is eligible to receive health coverage from this program?
- b. What type of medication coverage is available through this program and to whom?
- c. Does the pharmacy where you are completing your rotation have any patients who receive coverage through this program? If yes, review how their medications are billed.

#### Veterans Affairs Canada (VAC)

- a. Who is eligible to receive medication coverage through Veteran's Affairs Canada?
- b. Visit the Veteran's Affairs Canada website: https://www.veterans.gc.ca/eng/services/health/group-health-insurance and review what possible health care benefits are available to qualified veterans.
- c. Review how requests for special authorization claims are managed.
- d. How are claims for medical supplies or home health care devices processed?
- e. Does VAC pay a special professional fee to the pharmacy for calling for a special authorization (SA) claim (when the claim is submitted)?

#### Non-Insured Health Benefits (NIHB) for Indigenous Communities & Jordan's Principle

- a. Visit the website for the NIHB program and familiarize yourself with what information can be found there about the NIHB program: http://www.hc-sc.gc.ca/fniah-spnia/nihb-ssna/index-eng.php
- b. Who is eligible for medication coverage under this plan?
- c. Locate online the list of medications and medical supplies covered by this plan.
- d. Are non-prescription medications covered by this plan?

- e. Could a plan member have a lost supply of medications replaced with this plan?
- f. Under what circumstances is a prior approval required for coverage of medications or medical supplies? How would a prior approval be arranged? Are prior approval drugs approved for the patient's home pharmacy only? How would the patient receive coverage for a prior approval medication if they needed to travel to another region?
- g. Are there any required "days supplied" limits for medications covered by this plan? Can a plan member request and receive a smaller quantity of medication than what the prescriber ordered?
- h. Visit the following websites to learn about Jordan's Principle and the services available to indigenous children <u>https://www.afn.ca/policy-sectors/social-secretariat/jordans-principle/</u> <u>https://www.canada.ca/en/indigenous-services-canada/services/jordans-principle.html</u>
- i. Review this information with your preceptor. Consider downloading and printing the poster available on the website to make the information available to pharmacy patients and community members. Discuss how you can integrate knowledge of this program into your pharmacist patient care process.

# PRIVATE EMPLOYER FUNDED INSURANCE PLANS

- a. Review with your preceptor commonly encountered third party insurance plans at the rotation site.
- b. Review how insurance information is entered and transmitted using the pharmacy's software program.
- c. What is the pharmacy's professional fee? Do all plans pay the same professional fee? Is the pharmacy required to charge the difference in professional fee to the patient?
- d. Do any private insurance plans pay for patient medication reviews?
- e. How are online claims managed when the provider is down or the lines for communication are down?
- f. What do patients normally have to do to ensure an over-age dependent is registered on a plan?
- g. Are there any private insurance plans that will provide medication coverage to people after the age of 65?
- h. Are there any insurance plans that require special authorization or prior approval requests for certain medications?
- i. What is a "health care spending account?"
- j. Do any insurance plans cover pharmacist assessment fees e.g., for minor ailment assessment, adaptation or therapeutic substitution; an assessment needed to prescribe medication etc.?
- k. If a patient has a concern when their plan does not cover a medication, to whom should they express their concern to? Who from the pharmacy team can help a patient with medication coverage issues?

1. What is the value-based pharmacy initiative operated by Green Shield Canada? What are the pros and cons of such an initiative?

## PRESCRIPTIONS & PATIENTS FACING FINANCIAL BARRIERS

- a. Pharmacists will encounter patients who are unable to fill a prescription due to the cost of the medication. Review with your preceptor how this situation is managed in the pharmacy. Since the pharmacist may not be the person who initially receives all the prescriptions into the pharmacy, is there a procedure in place to make sure the pharmacist on duty is notified of a patient who is not able to fill a prescription because of cost?
- b. Review with your preceptor what possible options might be available to assist a patient who cannot afford a medication prescribed.
- c. What should be done if a patient presents to the pharmacy with a prescription they cannot afford?

# PRESCRIPTION MEDICATION SAVINGS CARDS

- a. Visit the website of one of the following medication savings card programs and review the types of medications savings programs offered: Innovicares: <u>https://innovicares.ca/en</u> Rx Help: <u>https://www.rxhelp.ca/en/default.aspx</u> Pfizer Originals: <u>https://www.pfizeroriginals.ca/</u>
- b. What are the benefits of medication savings cards?
- c. Are there any disadvantages of using medication savings cards?

# **READING ADJUDICATION SCREENS FOR MEDICATION PAYMENTS:**

- a. Review how to read the online adjudication screen for a third-party online claim.
- b. Review the various possible adjudication messages that may be received when accepting or rejecting an electronic claim. Learn how a claim is accepted or rejected and who determines whether to accept or reject a price adjustment for a cost difference due to mark-up, brand selection, etc.
- c. Learn how to access a previously transmitted claims adjudication screen to review a payment received.
- d. Review how to cancel and rebill a prescription medication claim.

#### FULL SCOPE OF PHARMACY PRACTICE

#### Please visit and review the following chart summarizing the scope of pharmacy practice in Canada:

https://www.pharmacists.ca/pharmacy-in-canada/scope-of-practice-canada/

- a. Are any of the professional services listed below within the scope of practice of pharmacists in the province of your rotation? Are any of the services listed below eligible for coverage under the provincial drug plan in the province of your rotation?
  - Medication reviews (basic and advanced)
  - Refusal to fill a prescription
  - Therapeutic substitution by the pharmacist
  - Assessment of patients for minor ailments (review list minor ailments in your province if applicable)
  - Prescribing of medication for minor ailments
  - Prescription adaptation
  - Medication prescribing beyond minor ailments
  - Smoking cessation assessment/consultation and prescribing
  - Immunization assessment, prescribing and administration
  - Administration of a medication by injection e.g., Depo-Provera, Vitamin B<sub>12</sub>, testosterone etc.
  - Emergency prescription refills
  - Health related pharmacy consultation services
  - Travel health assessment and prescribing
  - Order, retrieve and interpret lab tests and diagnostic assessments for the management of medication therapy
- b. Changes to practice due to COVID-19. Review with your preceptor COVID-19 related changes made to a Pharmacist's Scope of Practice in the province of your rotation. Discuss with your preceptor how these changes in scope have supported patient care.
- c. Using the above list of services, review with your preceptor whether any other government (e.g., social assistance) or private insurance plans reimburse for these services?
- d. Are patients charged for any of the above services if the services are within the scope of practice of a pharmacist in the province of your rotation?
- e. Can you identify any other professional pharmacy services not listed above but could be potential sources of revenue for pharmacies now or in the future?
- f. Are there any standards of practice that must be followed by a pharmacist who chooses to provide any or all the above professional services? Please check the website for your provincial pharmacy regulator.
- g. Does a pharmacist require any additional certification, training or registration in order to be able to provide any of the above listed professional services?

Pharmacy Students should visit the website of the pharmacy regulatory body for the province of their rotation to locate and review any available documents, standards, regulations and policies developed to support the full scope of pharmacy practice including pharmacist prescribing.

#### Pharmacy students please review the following questions with your preceptor during the rotation.

- h. Are there any additional requirements over and above a pharmacist license needed to prescribe medications in the province of your rotation?
- i. What education, certification or training is required for a pharmacist to be eligible to prescribe and/or administer immunizations or injections? What must be on file with the pharmacy regulatory body for pharmacists to be able to provide these services as part of their practice?
- j. How are pharmacists reimbursed for assessing a patient's need for medication and subsequently prescribing a medication?
- k. How will these new standards of practice or scope of practice changes benefit patient care?
- 1. Talk with your preceptor and/or pharmacy manager/owner about how scope of pharmacy practice changes can or will be integrated into the business plans for the community pharmacy and the workflow related to patient care at the pharmacy.

# PHAR 3081/2 Unit Three: Interprofessional Education (IPE)

# "Interprofessional Education occurs when two or more professions learn with, from and about each other to improve collaboration and the quality of care" CAIPE 2002<sup>1</sup>

Effective Interprofessional Education<sup>1</sup>:

- Works to improve the quality of care
- Focuses on the needs of service users and care providers
- Involves service users and care providers
- Encourages professions to learn with, from and about each other
- Respects the integrity and contribution of each profession
- Enhances practice within professions
- Increases professional satisfaction

#### **Learning Objectives:**

#### At the end of the rotation the student will have:

- researched and learned about another health care profession in the practice setting (COLLABORATOR);
- interviewed and, if possible, shadowed a member of the other health profession to gain insight into their role within the health care system at the community level and the opportunities to collaborate with pharmacists and other health professionals to optimize patient care (COLLABORATOR);
  - at a level expected from a Pharmacy Student who is completing their first of three final undergraduate clinical rotations and is 12 to 18 months away from entry to practice as a pharmacist

#### Learning "with, from and about" other Health Professions

- Select a regulated health profession other than pharmacy that you would like to learn more about. A regulated health profession is one that is governed by a provincial act of legislation and is self-regulated by its members. Examples include: Nursing, Dentistry, Medicine, Optometry, Naturopathic Medicine (in some provinces), Physiotherapy, Occupational Therapy, Respiratory Therapy, Chiropractor, Dental Hygiene, Veterinary Medicine, Speech Language Pathology, Audiology etc.
- 2. With the help of your preceptor, locate a practitioner in the community (not within a hospital or affiliated hospital site) where your rotation is located who would be willing to allow you to complete an interview with them to learn more about their profession, their interaction with pharmacy and the type of patient care they provide. <u>DUE TO COVID-19</u>: This interview will most likely need to be arranged by telephone or via an online meeting portal.
- 3. Prepare a list of interview questions and review them with your preceptor prior to your interview. When preparing the questions keep in mind that you need to gather information on the following:
  - Education required to enter the profession
  - Typical practice day
  - Other health professionals encountered/collaborate with
  - Types of patients encountered in the practice
  - Philosophy of care
  - Interactions with pharmacy

- Rewards and challenges of their profession
- Scope of practice
- How COVID-19 has affected their professional scope and any changes that have resulted?
- 4. Please document on your assessment form who you interviewed and/or shadowed and their profession.
- 5. Thank the health professional for their time.

STUDENTS PLEASE NOTE: This activity may need to be arranged outside of regular pharmacy rotation hours to accommodate the schedule of the other professional. This activity may need to be modified due to COVID-19 restrictions. Creativity and flexibility with this activity is encouraged and supported.

#### **References:**

1. https://www.caipe.org/

# PHAR 3081/2 Unit Four: Patient Care\*

Depending on situation during the COVID-19 pandemic, patient care may need to be completed using a variety of methods such as telephone or virtual methods while ensuring that safety and pharmacy practice policies and procedures are maintained.

#### Learning Objectives:

At the end of the rotation the student will have:

- completed and documented a minimum of three detailed patient medication workups/reviews in a community pharmacy practice setting (CARE PROVIDER);
- strengthened their prescription and non-prescription pharmacy patient care skills including triage, assessment, care planning, follow-up and monitoring (CARE PROVIDER).
  - at a level expected from a Pharmacy Student who is completing their first of three final undergraduate clinical rotations and is 12 to 18 months away from entry to practice as a pharmacist.

# Activities\*

#### **Providing Patient Care and Education**:

Throughout the rotation students should be actively involved with patient care in both the prescription and non-prescription areas of the pharmacy. Students should take every opportunity (<u>under the</u> <u>supervision of their preceptor</u>) to communicate with patients about medication and health related issues. If a student completes the minimum three required detailed medication reviews prior to the end of the rotation, they should continue to seek additional opportunities to provide patient focused pharmacy care. Students should be active learners and participants in the pharmacy patient care process throughout the entire rotation, and always work under the supervision of their pharmacist preceptor to meet the level of supervision required of a pharmacy student in the province of their rotation.

a. At the start of the rotation and with the help of your preceptor, identify <u>at least three</u> different patients with whom you will complete a detailed medication workup/review session. This activity allows students a chance to encounter patients with complex health histories. Students should strive to experience a minimum of three different disease states in the cases selected for this unit. Patient medications should not be examined in isolation but considered in the context of the patient's medical conditions as well as their daily living; therefore, it is important for these sessions to involve the patient as a full partner.

# Consideration of some or all the following criteria will help select an appropriate patient for this activity:

- I. Multiple medications (four or more regular medications)
- II. Multiple medical conditions
- III. History of multiple prescribers for one patient
- IV. Newly diagnosed with a medical condition requiring multiple drug therapy

- V. Uncommon medical condition requiring drug therapy
- VI. Patient or prescriber has a specific question about drug therapy
- VII. Recent discharge from hospital with changes to medication regimen
- VIII. Any criteria determined by preceptor and student that is deemed to be of benefit for the student's learning needs

# Additional Patient Criteria:

- ✓ Patients must be from the pharmacy patient population.
- ✓ When possible, students should select patients with different disease states.
- ✓ Patients cannot be a direct relative (including by marriage/common-law) of the preceptor or student.
- ✓ Patients can be pre-selected by the preceptor prior to the student's arrival or can be selected together early in the rotation.
- ✓ Prescribers must be willing (with the patient's consent) to communicate as needed with the pharmacy student and preceptor.
- b. Obtain the patient's agreement to participate in this learning activity. Obtain consent from the patient for collaborative information to be collected if needed (i.e. lab values) and discussed with other health care providers involved in the patient's care. Determine that the patient is agreeable with the pharmacist and/or student communicating any medication therapy recommendations to prescriber(s) if needed during or after the assessment. Follow any site-specific requirements for documenting patient consent.
- c. Arrange a time to meet with each patient to conduct a detailed patient interview. This most likely will be done virtually or by telephone from the pharmacy. Ensure there is an area available that allows for complete privacy. Explain the expected length of the interview and the potential benefits for the patient and student.
- d. Identify any patient care forms or tools (electronic or paper) that could be used to help gather the necessary patient information needed to assess and work up patient cases.
- e. Prior to each interview, review with your preceptor the patient's medication history on file. Make note of any incomplete or missing information that may need to be updated in the computer profile after the patient interview. Review with your preceptor how you plan to conduct the patient interview. Adjust your plan if needed.
- f. Conduct a detailed patient interview to obtain a complete understanding of the patient's medication experiences. Determine what the patient hopes to achieve from their medication therapy.

A student must always identify as a pharmacy student and let the patient know who the preceptor is, that the preceptor is fully responsible for the pharmacy care provided and that the preceptor is available for questions. Students should confirm that the patient understands the information gathered will be held in the strictest confidence. Remind the patient that notes will be taken for reference only. Pharmacy students must complete all patient activities under the supervision of their preceptor.

- g. When the interview is completed, thank the patient for their time. Make arrangements to follow up with the patient once you have completed your assessment and before the end of the rotation.
- h. Synthesize and interpret the patient information gathered. If necessary, and with the patient's and preceptor's full consent, contact the patient's prescriber(s) for any missing or incomplete patient information.
- i. Questions to consider when reviewing the patient's medication and health history include\*:
  - Is the medication appropriate?
    - Is there a clinical indication for each medication being taken?
    - Will the patient's medical conditions benefit from the medication prescribed?
  - Is the medication effective?
    - Is the most effective medication being used?
    - Is the dosage sufficient to achieve the goals of therapy?
  - Is the medication safe?
    - Is the patient experiencing any adverse drug reactions?
    - Are there any signs of toxicity?
  - If the above questions do not elicit any negative information to investigate further, then continue and assess the patient's level of adherence for each medication.
  - Review and assess any barriers to medication adherence\*:
    - <u>Educational barriers</u> Patient's understanding of their medications and medical conditions, including why the medication is prescribed, expected benefits, and implications of failing to take them.
    - <u>Literacy barriers</u> Patient's ability to read labels and written information.
    - <u>**Physical barriers**</u> Patient's physical problems that might impact proper use of medication such as swallowing, removing vial lids, vision or hearing impairment.
    - <u>Cognitive barriers</u> Patient's lack of ability to understand information because of dementia or cognitive decline
    - <u>**Complexity barriers**</u> Patient's ability to organize and administer the medication regimen set forth.
    - Financial barriers Patient's ability to afford/access medications.
- j. Develop a list of drug therapy problems (DTPs)\* identified from the patient assessment completed.
  - Unnecessary medication
  - Needs additional medication
  - Medication is ineffective
  - Dose is too low
  - Adverse drug reaction
  - Dose too high
  - Patient is not adherent
- k. Prioritize the drug therapy problems (DTPs) identified.
- 1. For each drug therapy problem identified, determine what options are available to resolve them.
- m. Analyze the available options. Consider whether you can make a recommendation with certainty. It would be expected that most students would answer "no" to this question and will proceed to the next step. If you are not able to make a definitive recommendation, review the literature to locate

additional information that can be critically appraised to help identify viable solutions for the patient's identified DTPs.

- n. Review your findings with your preceptor. Discuss with your preceptor what your interventions and recommendations will be to help resolve the patient's DTPs.
- o. Review your findings with the patient under the supervision of your pharmacist preceptor. Together with the patient, review and prioritize the DTPs identified. Review and agree upon a care plan that will be followed to help resolve or minimize identified DTPs.
- p. If needed and appropriate (with the patient's and preceptor's consent), communicate any recommendations and interventions to the patient's prescriber.
- q. Develop a plan to determine what parameters will be used to monitor the safety and efficacy of the patient's drug therapy. Determine who will monitor (patient, pharmacist, prescriber), when to start monitoring and for how long.
- r. Educate the patient about what they will need to know and do to achieve the agreed upon medication therapy goals.
- s. If appropriate, schedule time to provide the patient with health information or disease management information that may help improve any of their medical conditions e.g. smoking cessation, recommendations for immunizations etc.
- t. Thank the patient for their time and contribution to your learning as a pharmacy student.
- u. Schedule a follow-up evaluation. Review the medication therapy recommendations made from your initial patient assessment. Determine if the patient requires any further adjustments, information, education or interventions.
- v. Review with your preceptor the final patient follow-up. Provide suggestions for continued patient follow up beyond the four weeks of your rotation.
- w. Document the patient assessment and follow up completed within the patient's pharmacy file.
- x. Securely dispose of (shred) any unneeded patient information and notes collected during this activity when finished at the rotation site.
- y. Review with your preceptor any barriers you encountered while conducting the medication reviews. Discussion should include possible strategies for improving opportunities for pharmacists to provide focused medication management services.
- Students must complete and review with their preceptor a minimum of three different patient case workups. Following each case work-up, preceptors should sign the assessment form to confirm the activity has been successfully completed.

# PLEASE NOTE: ROTATION ACTIVITIES MAY NEED TO BE MODIFIED TO MEET THE PUBLIC HEALTH AND SAFETY REQUIREMENTS OF COVID-19.

<sup>\*</sup>From: Cipolle R.J., Strand L.M., & Morley P.C. (2004). *Pharmaceutical Care Practice: The Clinician's Guide*. New York: McGraw-Hill Companies Ltd. & From: Cipolle R.J., Strand L.M., & Morley P.C. (2012). *Pharmaceutical Care Practice: The Patient Centered Approach to Medication Management* New York: McGraw-Hill Companies Ltd.

#### Question Sets to Review with Preceptor Understanding and Addressing the Opioid Crisis in Our Communities & the Treatment of Substance Use Disorders in the Community

# **References**

# http://www.camh.ca/en/hospital/Pages/home.aspx

http://www.nspharmacists.ca/?page=standardsofpractice#SOPMethadoneMaintenance

https://novascotia.ca/opioid/

https://www.cbc.ca/news/canada/nova-scotia/benzodiazepines-opioids-deaths-nova-scotia-1.4937134

http://www.hc-sc.gc.ca/hc-ps/substancontrol/exemptions/methadone-eng.php

http://www.cpsns.ns.ca/Standards-Guidelines

https://www.cdc.gov/drugoverdose/prescribing/guideline.html

http://journals.sagepub.com/doi/abs/10.1177/1715163516671968?journalCode=cphc

https://substanceabusepolicy.biomedcentral.com/articles/10.1186/s13011-016-0050-9

# **DISCUSSION QUESTIONS**

- i. What are the possible personal and societal impacts of substance use disorders?
- ii. Does the pharmacy take part in the provision of medications for the treatment of opioid use disorder in the community?
  - a. Review with your preceptor common medications prescribed for opioid use disorder including methadone and buprenorphine/naloxone.
  - b. Review common potential drug interactions, contraindications and things to consider when clinically managing the following drugs: methadone; buprenorphine and naloxone; naloxone; and naltrexone.
  - c. Review common potential drug interactions with benzodiazepine medications. Discuss safety considerations patients should be knowledgeable of and pharmacists should monitor for and document when providing patient care related to benzodiazepine use.
- iii. What other medications might be used to help treat other types of substance use disorders in the community?
- iv. Are the medications used to treat opioid use disorders covered by government-funded drug plans? Private drug plans?
- v. Review the Health Canada opioid warning sticker and patient information handout requirements in Canada. Learn how this requirement is followed in the pharmacy.

https://www.canada.ca/en/health-canada/services/drugs-health-products/drugproducts/applications-submissions/policies/warning-sticker-opioid-patient-informationhandout.html

- vi. Review any pharmacy standards of practice in the province of your rotation related to the provision of medications for the treatment of opioid use disorder.
- vii. Are there any courses/continuing education programs available to educate pharmacists and/or prescribers who provide care to patients with opioid use disorder?
- viii. How can a patient seek help if they have a substance use disorder? Where could a pharmacist refer a patient in your community?
- ix. Where can a health care provider seek help if they themselves develop a substance use disorder?
- x. What should a health care provider do if they suspect another health care provider:
  - a. Has developed a substance use disorder?
  - b. Is working while impaired?
  - c. Is diverting medications?
  - d. Do healthcare providers have a duty to report to the regulator a colleague who is impaired at work?
- xi. <u>If possible</u>, and with the help of your preceptor arrange to speak with a prescriber in the community who provides community-based treatment for patients with opioid use disorder. Learn more about their practice, common communications with pharmacists and practice philosophy.
- xii. Determine whether the pharmacy stocks naloxone kits. Learn about the cost of the kit and whether any insurance plans or government programs provide payment for the kit. Is naloxone nasal spray covered in your province? By private plans? If possible, observe a pharmacist providing counselling and advice to a patient or care provider about naloxone nasal spray. Under the supervision and guidance of your preceptor, take part in providing patient education for naloxone nasal spray.
- xiii. <u>If possible</u>, observe a pharmacist providing counselling and advice to a patient or care provider about a naloxone injection kit. Under the supervision and guidance of your preceptor take part in providing patient education for naloxone kits.
- xiv. When should a pharmacist recommend a naloxone injection kit or naloxone nasal spray?
- xv. How is the security of the pharmacy managed in relation to possible robberies?
- xvi. How does the pharmacy manager manage the inventory of the pharmacy to minimize/prevent diversion of medications?
- xvii. How are narcotic and controlled drugs that are returned to the pharmacy for disposal received and disposed of?
- xviii. The new injectable prescription product called Sublocade<sup>™</sup> has been approved in Canada. Has this product been utilized at this pharmacy? Do any drug plans cover this product? What are the pros and cons? Who is able to administer this medication?
- xix. Review the delivery of opioid agonist therapy (OAT) during the COVID-19 pandemic. Has the provincial pharmacy regulator provided any reminders, guidance or made any changes to standards of practice?
- xx. Review the federal government approvals for diacetylmorphine and hydromorphone for use in safe harm reduction injections and where such safe injection programs are available in Canada.
- xxi. What is the Good Samaritan Drug Overdose Act in Canada?
- xxii. Share and discuss this link with your preceptor: <u>https://www.canada.ca/en/health-canada/services/substance-use/problematic-prescription-drug-use/opioids/federal-actions/overview.html</u>

- xxiii. Share and discuss this article with your preceptor: <u>https://www.ccsa.ca/sites/default/files/2020-06/CCSA-Expanded-Response-Options-Opioid-</u> <u>Harms-Case-Studies-2020-en.pdf</u>
- xxiv. Review this ISMP Safety Bulletin <u>https://www.ismp-canada.org/news/item/463/</u> and discuss the recommendations with your preceptor. How are such safety bulletins communicated and shared with the pharmacy team?

#### Medical use of cannabis question set

#### **References:**

https://www.camh.ca/-/media/files/pdfs---reports-and-books---research/canadas-lower-riskguidelines-cannabis-pdf.pdf

https://www.canada.ca/en/services/health/campaigns/cannabis/education-resources.html

https://www.canada.ca/en/health-canada/services/drugs-medication/cannabis/resources.html?healthcare-professionals

- 1. Determine how patients access cannabis for medical purposes in the province of your rotation.
- 2. What is the difference between medical cannabis and recreational cannabis?
- 3. What are the common active ingredients in medical cannabis? What are the possible therapeutic effects of medical cannabis?
- 4. How does a patient obtain a medical assessment and possible prescription for medical use of cannabis? What type of health professional can prescribe medical cannabis?
- 5. Is medical cannabis covered by any insurance plans in Canada?
- 6. Review with your preceptor how the use of medical cannabis is accounted for within a patient's pharmacy profile/chart. Discuss effective ways to gather this information when completing a best possible medication history. Is there a way to check for drug interactions with medical cannabis within the pharmacy computer system?
- 7. Review common drug interactions with cannabis use.
- 8. Review common side effects of cannabis.
- 9. Determine what type of information is available to help patients make an informed decision about using medical cannabis. What are the risks and benefits patients need to consider when using medical cannabis?

#### PHAR 3081/2 Unit Five: Drug Information

In second- and third-year Critical Appraisal Series (CAS), students learn about the effective use of drug information resources and how to respond to drug information (DI) questions. Students learn to complete online searches to obtain relevant articles and critically appraise those articles. In Skills Lab, the students are given drug information questions to answer. Students can access the Dalhousie Kellogg Library remote access system from any internet web browser page. The link for remote access is: <a href="http://libraries.dal.ca/">http://libraries.dal.ca/</a>

## Learning Objective:

#### Upon completion of the rotation students will have:

- demonstrated the ability to contribute to patient care by responding appropriately to drug information (DI) requests encountered during the rotation (SCHOLAR; CARE PROVIDER; COMMUNICATOR)
  - at a level expected for a Pharmacy Student who is completing their first of three final undergraduate clinical rotations and is 12 to 18 months away from entry to practice as a pharmacist.

Depending on the situation as the COVID-19 pandemic evolves, drug information questions may need to be delivered using a variety of methods such as telephone or using online communication tools while ensuring that pharmacy practice policies and procedures are maintained.

#### **Activities**

<u>Please Note:</u> Students will be a resource for DI questions throughout their rotation. Students must be ready to contribute to DI questions when needed and because of patient care activities.

- c. Complete an orientation to the drug information resources accessible at the community pharmacy.
- d. Throughout the rotation, complete routine drug information requests as coordinated by the preceptor. Requests may originate from:
  - $\succ$  the preceptor
  - > other health care professionals
  - > patients

#### Use the following steps as a guide to help you complete the DI request:

- 1. Clearly establish the request and obtain all necessary background information.
- 2. Determine an appropriate approach to locate the drug information needed.
- 3. Use multiple basic drug information resources.
- 4. Apply your CAS skills when needed to critically appraise the gathered information.
- 5. Communicate responses appropriately to the preceptor, both verbally and in writing.
- 6. <u>If Needed</u>: Communicate responses appropriately to the requester, verbally <u>and/or</u> in writing (under the supervision of your preceptor).

A sample DI Request Form is included with this unit for the student to use or they may use another one of their choice or one used by the rotation site.

# SAMPLE PEP Drug Information Request/Response Form



Requester
Location
Address
Telephone
Fax
E-mail
ASAP $\Box$ Today $\Box$ 1-2 Days $\Box$ No Rush $\Box$
Source of Request
Health Professional:
□ Physician □ Nurse □ Pharmacist □ Patient
□ Other
Relevant Background Information (age, weight, disease states, medications, lab values, allergies etc.):

# **Ultimate Question:**

Type of Request		
Administration	Formulation	Pharmaceutics
Adverse effect	identify substance/availability	Pharmacology
Alternative therapy	Interaction	Pregnancy/lactation
Biopharmaceutics	Law/regulation	Professional issues
Compatibility/stability	Lecture	Therapeutics
Copy of article	Library	Toxicity
Cost	Monograph	Other
Dosage	Patient information	

**Response (use additional paper if needed):** 

# **References:**

#### PHAR 3081/2 Unit Six: Health Promotion Project

Depending on how the COVID-19 pandemic evolves, public presentations or clinics may not be safe or feasible. Please discuss with your preceptor the best method to complete this unit. The College supports your creativity whether it be using a video recording, online presentation platform or some other virtual method. Communication with other pharmacy programs in Canada where clinical rotations have been operating during the Pandemic has provided examples of novel adjustments for health promotion activities such as: outdoor presentations to recreation groups following Public Health rules; online presentations; pamphlet design and distribution; creation of a new pharmacy service; creation of an education video; design and preparation of a health promotion service within the pharmacy and there are many other potential options. Please use your creativity to develop a project that will support the pharmacy practice and patient population that is safe, practical and that meets Public Health rules.

#### Learning Objectives:

#### At the end of the rotation the pharmacy student will have:

- Designed and created (online, social distanced, pamphlet, display etc.) a health promotion project (COMMUNICATOR);
- demonstrated an appropriate level of professional understanding of the selected health topic (PROFESSIONAL);
- engaged the audience or designed the project using appropriate tone, pace and language (COMMUNICATOR);
- > interpreted questions effectively and provided appropriate answers (COMMUNICATOR);
- gathered and reviewed feedback from preceptor/pharmacy team/users of the health promotion project (PROFESSIONAL);
  - at a level expected from a Pharmacy Student who is completing their first of three final undergraduate clinical rotations and is 12 to 18 months away from entry to practice as a pharmacist.

#### **Activities**

- a. In consultation with your preceptor identify a health promotion project topic of interest that can support a patient population served by the pharmacy.
- b. Design a health promotion project (see comments/suggestions above). Review your plans with your preceptor.
- c. Select <u>or</u> create educational materials that will be appropriate for your anticipated audience. Review the materials selected with your preceptor.
- d. In consultation with your preceptor make a plan to complete this activity.
- e. Review the final health promotion plan with your preceptor.
- f. Implement the health promotion plan in a safe manner.
- g. Obtain feedback, if possible, from participants who use the health promotion plan, or seek feedback from your preceptor and/or other pharmacy team members.
- h. Review and reflect upon the feedback received and make adjustments to the project as needed.
#### **Fourth Year Rotation Goals**

At the end of the rotation, and prior to the final self-assessment/assessment review with their preceptor, students should reflect on the past 4 weeks and self-identify at least three learning goals for fourth year rotations. The goals should be reviewed with the current preceptor. Students should keep a copy of their goals to help with their personal 4<sup>th</sup> year rotation planning over the next two rotations.

#### Personal Learning Goals for Fourth Year Rotations 2021

1	 	 
2	 	 
3	 	 

## Please keep a copy of this form for your personal fourth year rotation planning.

#### This form should NOT be returned to the College of Pharmacy.

#### Dalhousie University College of Pharmacy: Student Self-Assessment Forms

#### Pharmacy 3081/2 (Community Pharmacy) PEP

**Pharmacy students please complete this self-assessment prior to your arrival on site, and before your midpoint and final assessments during your Pharmacy 3081/2 rotation.** Read each statement on the left of the chart and select a description from the assessment scale that best reflects how prepared you are to practice the skill(s) described. Note the number of your selection below the appropriate time (PRE = initial self-assessment, MID=mid-point & END=final). If you are not able to self-assess the described skill(s) please use the notation "NA".

# The expected level of competence expected for this rotation should be consistent with a Pharmacy Student who is completing their first of three final undergraduate clinical rotations and is 12 to 18 months away from entry to practice as a pharmacist.

Students must review their initial self-assessment at the start of the rotation with the preceptor. A student's initial self-assessment will reflect their past PEP (Practice Experience Program), PBL (Problem Based Learning) group work, CAS (Critical Appraisal Skills) learning, skills lab learning and pharmacy work experiences. A review of the student's initial self-assessment can provide information that will allow the rotation to be tailored to suit the learning needs of the student.

Preceptors will assign a grade of pass or fail at the conclusion of the rotation.

Please refer to the previous section of this manual for a detailed summary of the assessment plan for his rotation course to determine what you need to complete on site and what needs to be submitted electronically.

#### If at any time a preceptor identifies that a student may not successfully complete the rotation, the Coordinator of Clinical Education must be contacted as soon as the potential for this concern is identified.



- 1. Significant improvement is required: please communicate & document concerns with student & contact Coordinator of Clinical Education
- 2. Needs further development: please communicate & document suggestions & concerns with student & contact Coordinator of Clinical Education
- 3. At expected level of practice
- 4. Above expected level of practice
- 5. Superior level of practice
- N/A- Not able to assess

"...for a Pharmacy Student who is completing their first of three final undergraduate clinical rotations and is 12 to 18 months away from entry to practice as a pharmacist."

Student is licensed as a *Registered Pharmacy Student* in the province of the rotation & holds personal professional liability insurance. YES \_\_\_\_NO \_\_\_\_ (rotation cannot start until license & insurance are in place)

Appropriate paperwork filed with pharmacy regulator for rotation YES \_\_\_\_NO \_\_\_\_ (NB & PEI) In NS holds a Technical Permit for injections YES\_\_\_\_ NO \_\_\_\_

Scale	Student Self-Assessment/Preceptor Assessment Scale:1. Significant improvement is required: please communicate & document concerns with student & contact Coordinator of Clinical Education2. Needs further development: please communicate & document suggestions & concerns with student & contact Coordinator of Clinical Education3. At expected level of practice 4. Above expected level of practice 5. Superior level of practice N/A- Not able to assess"for a Pharmacy Student who is completing their first of three final undergraduate clinical rotations		
	first of three final undergraduate clinical rotationsand is 12 to 18 months away from entry to practice asa pharmacist."PREMID-POINTFINAL		
Professional & Interpersonal Skills	IKE		FINAL
Licensed as a Registered Pharmacy Student (and holds technical permit for injections in Nova Scotia) in the province of the rotation prior to the start of the rotation (holds personal professional liability insurance where required by law) and filed appropriate preceptor/site paperwork with the pharmacy regulator.	professional liability insurance to start the rotation		red and hold personal ance to start the rotation pordinator of Clinical
Is approachable and accessible to patients, family members, caregivers and pharmacy team members.			
Demonstrates commitment to each patient regardless of race, religion, gender, gender identity, gender expression, sexual orientation, age, health, cultural or educational background or economic status.			
Displays a helping ethic when interacting with patients, family members, caregivers and pharmacy team members.			

Shows respect for the dignity of the patient			
Presents themself in a professional manner; always identifies themself as a pharmacy student and wears a nametag that identifies them as a pharmacy student.			
Displays appropriate verbal, non-verbal, writing & listening skills with patients, family members, caregivers, pharmacy team members or health care professionals.			
Able to adapt communication to the needs of the patient, family member, caregiver, pharmacy team member or health care professional.			
Displays sensitivity, compassion, respect & empathy to patient concerns			
Follows required dress code	□ YES □ NO		NO
Is reliable and punctual; follows agreed upon schedule.	□ YES □ NO (if NO please contact Coordinator of Clinical Education)		
Completes tasks carefully & thoroughly			

Professional & Interpersonal Skills (cont'd)			
	PRE	MID-POINT	FINAL
Respects patient confidentiality			
Displays a positive attitude toward pharmacy practice			
Shows interest and takes initiative			
Demonstrates critical thinking, analysis, and action which are based on ethical and legal principles			
Demonstrates good organization & time management skills			
Maintains appropriate professional boundaries			
Acknowledges own professional limits and abilities			
Accepts responsibility for actions & decisions			
Practices time management, stress- management, and adaptive skills			
Strives to continuously improve professional performance and knowledge			
Uses feedback to improve performance			
Completes extra reading or assignments when suggested or needed			

#### **Professional and Interpersonal Skills - Additional Comments:**

Scale	<ul> <li>Student Self-Assessment/Preceptor Assessment Scale: <ol> <li>Significant improvement is required: please communicate &amp; document concerns with student &amp; contact Coordinator of Clinical Education</li> <li>Needs further development: please communicate &amp; document suggestions &amp; concerns with student &amp; contact Coordinator of Clinical Education</li> <li>At expected level of practice</li> <li>Above expected level of practice</li> <li>Superior level of practice</li> <li>Not able to assess</li> </ol> </li> <li>"for a Pharmacy Student who is completing their first of three final undergraduate clinical rotations and is 12 to 18 months away from entry to practice as a pharmacist."</li> </ul>		
	PRE	MID-POINT	FINAL
Patient Care			
Demonstrates knowledge of appropriate drug therapy, pathophysiology, patient monitoring & follow-up			
Uses an organized & systematic approach for gathering accurate & complete patient information			
Interprets patient information gathered to effectively identify & prioritize drug therapy problems			
<ul> <li>Able to establish goals of therapy that are:</li> <li>sensitive to the patient's needs &amp; concerns</li> <li>clinically sound</li> <li>observable &amp; measurable</li> </ul>			
Applies best available evidence to patient's clinical situation			
Recommends non-drug therapy options when appropriate			
Monitors, follows up and documents care provided to patients			
Refers to or consults with other health care providers or pharmacy team members when appropriate			

Actively engages in and contributes to quality patient care			
Completes <u>at least</u> <b>THREE</b> detailed patient care summaries during the rotation.	□ Yes □ No If no, please contact Coordinator of Clinical Education		Clinical Education.
Patient Care Summary	The	rapeutic Topics Cov	ered
Patient Care Summary #1			
Patient Care Summary #2			
Patient Care Summary #3			

## Unit Four: Question sets completed on Opioid Crisis; Substance Use Disorders & Medical Cannabis

 $\Box$  Yes  $\Box$  No

#### **Additional Comments:**

Scale	<ul> <li>Student Self-Assessment/Preceptor Assessment Scale: <ol> <li>Significant improvement is required: please communicate &amp; document concerns with student &amp; contact Coordinator of Clinical Education</li> <li>Needs further development: please communicate &amp; document suggestions &amp; concerns with student &amp; contact Coordinator of Clinical Education</li> <li>At expected level of practice</li> <li>Above expected level of practice</li> <li>Superior level of practice</li> </ol> </li> <li>*for a Pharmacy Student who is completing their first of three final undergraduate clinical rotations and is 7 to 12 months away from entry to practice as a pharmacist."</li> </ul>			
	PRE	MID-POINT	FINAL	
Drug Information				
Provides accurate, timely and appropriate drug & disease information that meets patient care needs				
Unit Two Reimbursement for Profession	nal Pharmacy Servi	ices		
Completes and reviews Unit Two based on personal learning needs of student	Completed			
<b>Unit Six Health Promotion</b>				
Successfully creates and completes health promotion project/activity (modified as needed for COVID-19 safety)	Title/Topic:			
Unit Three Interprofessional Education (IPE) Activity				
Health Professional Interviewed (modified as needed for COVID-19 safety):				
Mid-Point Assessment Review Date:				

Mid-Point Assessment Review Date:	
Final Assessment Review Date:	
Preceptor's Signature:	
Student's Signature:	

#### Dalhousie University College of Pharmacy: Preceptor Assessment of Pharmacy Student

#### Pharmacy 3081/2 (Community Pharmacy) PEP

**Preceptors, please complete this assessment of the student at the middle and end of the rotation.** Please read each statement on the left of the form and select a description from the assessment scale that best reflects how prepared you have observed the student to be able to practice the skill(s) described and note the number of your selection below the time of the evaluation (mid-point & final). If you are not able to assess the described skill(s) please use the notation "NA".

#### The level of competence expected for this rotation should be consistent with a Pharmacy Student who is completing their first of three final undergraduate clinical rotations and is 12 to 18 months away from entry to practice as a pharmacist.

Students must review their initial self-assessment at the start of the rotation with the preceptor. A student's initial self-assessment will reflect their past PEP (Practice Experience Program), PBL (Problem Based Learning) group work, CAS (Critical Appraisal Skills) learning, skills lab learning and pharmacy work experiences. A review of the student's initial, mid-point and final self-assessments can provide information that will allow the rotation to be tailored to suit the learning needs of the student and offers a starting point for constructive feedback from the preceptor.

Preceptors will assign a grade of pass or fail at the conclusion of the rotation.

#### DURING COVID-19 PLEASE NOTE ADJUSTED ASESSMENT SUBMISSION

**REQUIREMENTS:** Please refer to the previous section of this manual for a summary of the requirements for assessments and grade submissions at the end of the course.

#### If at any time a preceptor identifies that a student may not successfully complete the rotation, the Coordinator of Clinical Education must be contacted as soon as the potential for this concern is identified.

#### Student Self-Assessment/Preceptor Assessment Scale:

- 1. Significant improvement is required: please communicate & document concerns with student & contact Coordinator of Clinical Education
- 2. Needs further development: please communicate & document suggestions & concerns with student & contact Coordinator of Clinical Education
- 3. At expected level of practice
- 4. Above expected level of practice
- 5. Superior level of practice
- N/A- Not able to assess

"...for a Pharmacy Student who is completing their first of three final undergraduate clinical rotations and is 12 to 18 months away from entry to practice as a pharmacist."

Student is licensed as a *Registered Pharmacy Student* in the province of the rotation & holds personal professional liability insurance. YES \_\_\_\_NO \_\_\_\_ (rotation cannot start until license & insurance are in place)

Appropriate paperwork filed with pharmacy regulator for rotation YES \_\_\_\_NO \_\_\_ (NB & PEI) In NS holds a Technical Permit for injections YES \_\_\_\_NO \_\_\_\_

Scale	Student Self-Assessment/Preceptor Assessment Scale:         1. Significant improvement is required: please communicate & document concerns with student & contact Coordinator of Clinical Education         2. Needs further development: please communicate & document suggestions & concerns with student & contact Coordinator of Clinical Education         3. At expected level of practice         4. Above expected level of practice         5. Superior level of practice         N/A- Not able to assess		
	"for a Pharmacy Student who is completing their first of three final undergraduate clinical rotations and is 7 to 12 months away from entry to practice as a pharmacist."PREMIDFINAL		
Professional & Interpersonal Skills Licensed as a Registered Pharmacy Student in the province of the rotation prior to the start of the rotation (holds personal professional liability insurance where required by law) and filed appropriate preceptor/site paperwork with the pharmacy regulator.	profession	nal liability insura	red and hold personal ince to start the rotation pordinator of Clinical
Is approachable and accessible to patients, family members, caregivers and pharmacy team members.			
Demonstrates commitment to each patient regardless of race, religion, gender, gender identity, gender expression, sexual orientation, age, health, cultural or educational background or economic status			
Displays a helping ethic when interacting with patients, family members, caregivers and pharmacy team members. Shows respect for the dignity of the patient			

Presents themself in a professional manner; always identifies themself as a pharmacy student and wears a nametag that identifies them as a pharmacy student.			
Displays appropriate verbal, non-verbal, writing & listening skills with patients, family members, caregivers, pharmacy team members or health care professionals.			
Able to adapt communication to the needs of the patient, family member, caregiver, pharmacy team member or health care professional.			
Displays sensitivity, compassion, respect & empathy to patient concerns			
Follows required dress code	$\Box$ YES $\Box$ NO		NO
Is reliable and punctual; follows agreed upon schedule.	□ YES □ NO (if NO please contact Coordinator of Clinical Education)		
Completes tasks carefully & thoroughly			

Professional & Interpersonal Skills (cont'd)			
	PRE	MID-POINT	FINAL
Respects patient confidentiality			
Displays a positive attitude toward pharmacy practice			
Shows interest and takes initiative			
Demonstrates critical thinking, analysis, and action which are based on ethical and legal principles			
Demonstrates good organization & time management skills			
Maintains appropriate professional boundaries			
Acknowledges own professional limits and abilities			
Accepts responsibility for actions & decisions			
Practices time management, stress- management, and adaptive skills			
Strives to continuously improve professional performance and knowledge			
Uses feedback to improve performance			
Completes extra reading or assignments when suggested or needed			

### **Professional and Interpersonal Skills - Additional Comments:**

Scale	<ul> <li>Student Self-Assessment/Preceptor Assessment Scale: <ol> <li>Significant improvement is required: please communicate &amp; document concerns with student &amp; contact Coordinator of Clinical Education</li> <li>Needs further development: please communicate &amp; document suggestions &amp; concerns with student &amp; contact Coordinator of Clinical Education</li> <li>At expected level of practice</li> <li>Above expected level of practice</li> <li>Superior level of practice</li> <li>Not able to assess</li> </ol> </li> <li>"for a Pharmacy Student who is completing their first of three final undergraduate clinical rotations and is 7 to 12 months away from entry to practice as a pharmacist."</li> </ul>	
	MID-POINT	FINAL
Patient Care		
Demonstrates knowledge of appropriate drug therapy, pathophysiology, patient monitoring & follow-up		
Uses an organized & systematic approach for gathering accurate & complete patient information		
Interprets patient information gathered to effectively identify & prioritize drug therapy problems		
<ul> <li>Able to establish goals of therapy that are:</li> <li>sensitive to the patient's needs &amp; concerns</li> <li>clinically sound</li> <li>observable &amp; measurable</li> </ul>		
Applies best available evidence to patient's clinical situation		
Recommends non-drug therapy options when appropriate		
Monitors, follows up and documents care provided to patients		
Refers to or consults with other health care providers or pharmacy team members when appropriate		

Actively engages in and contributes to quality patient care		
Completes at least THREE detailed	🗆 Yes 🗆 No	
patient care workups during the rotation.	(If NO before end of rotation, please contact Coordinator	
	of Clinical Education)	

Unit Four: Question sets completed: Opioid Crisis; Substance Use Disorders & Medical Cannabis

□ Completed

Please comment on the contributions made by the pharmacy student to patient care at the rotation site:

**Additional Comments:** 

Scale	<ul> <li>Student Self-Assessment/Preceptor Assessment Scale: <ol> <li>Significant improvement is required: please communicate &amp; document concerns with student &amp; contact Coordinator of Clinical Education</li> <li>Needs further development: please communicate &amp; document suggestions &amp; concerns with student &amp; contact Coordinator of Clinical Education</li> <li>At expected level of practice</li> <li>Above expected level of practice</li> <li>Superior level of practice</li> <li>Net able to assess</li> </ol> </li> <li>"for a Pharmacy Student who is completing their first of three final undergraduate clinical rotations and 12 to 18 months away from entry to practice as a pharmacist."</li> </ul>		
Drug Information	MID-POINT	FINAL	
Provides accurate, timely and appropriate drug & disease information that meets patient care needs			
Unit Two Reimbursement for Profession Completes and reviews Unit Two based on personal learning needs of student	al Pharmacy Services   Completed		
Unit Six Health Promotion			
Successfully creates and completes health promotion project/activity (modified as needed with COVID-19 safety in mind)	Title/Topic:		
Unit Three Interprofessional Education (IPE) Activity			
Health Professional Interviewed (modified as needed with COVID-19 safety in mind):			
Mid-Point Assessment Review Date:			

### THANK YOU, FOR YOUR CRITICAL SUPPORT AS A PEP PRECEPTOR DURING COVID-19:

# Are you interested in free online access to the Dalhousie University Library resources?

Preceptors are reminded that they are welcome to apply for an *Adjunct Appointment* following the completion of the Dal Faculty of Health online preceptor education program and regular participation as a preceptor with the Dalhousie College of Pharmacy Practice Experience Program.

Appointment details can be found on the preceptor website:

https://www.dal.ca/faculty/health/pharmacy/program s/preceptor-development-program.html

This appointment provides preceptors with online Dalhousie University library access.